

1165-c.15

THE CELEBRATED
Dr. Frederic Ruysch's
Practical Observations
IN
Surgery and Midwifry.

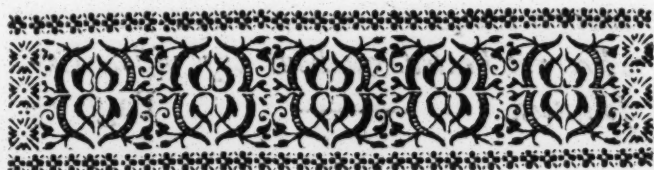
Now first Translated from the
LATIN into ENGLISH,
By a PHYSICIAN.

Illustrated with Copper-Plates.



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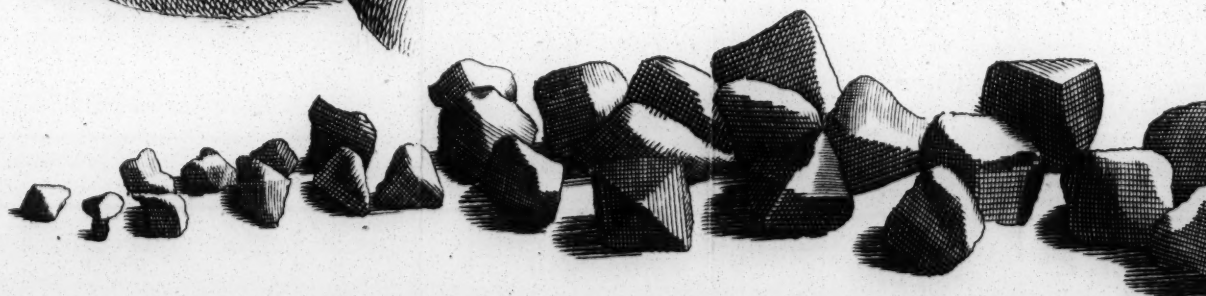
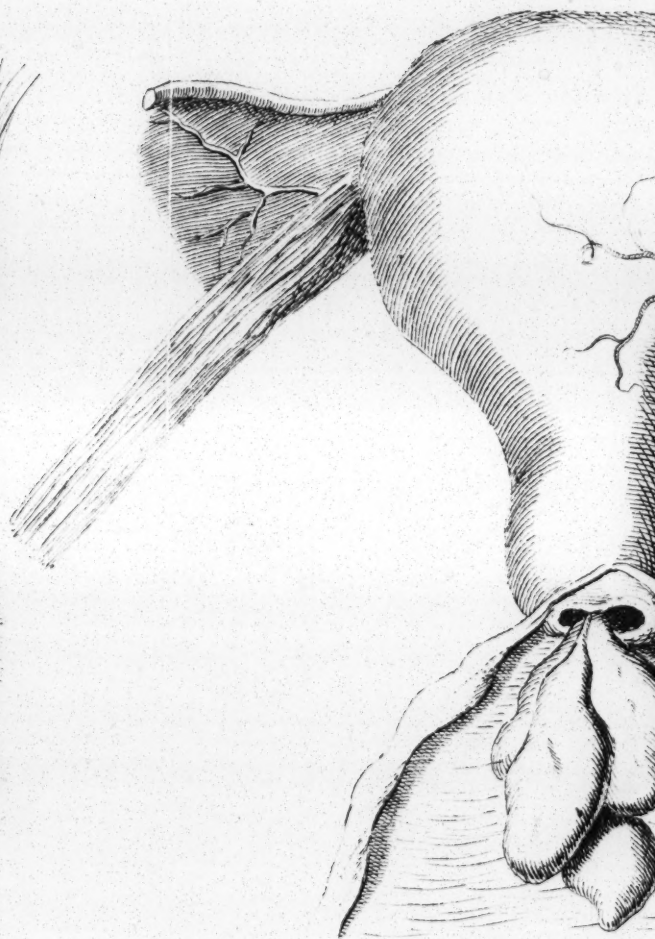
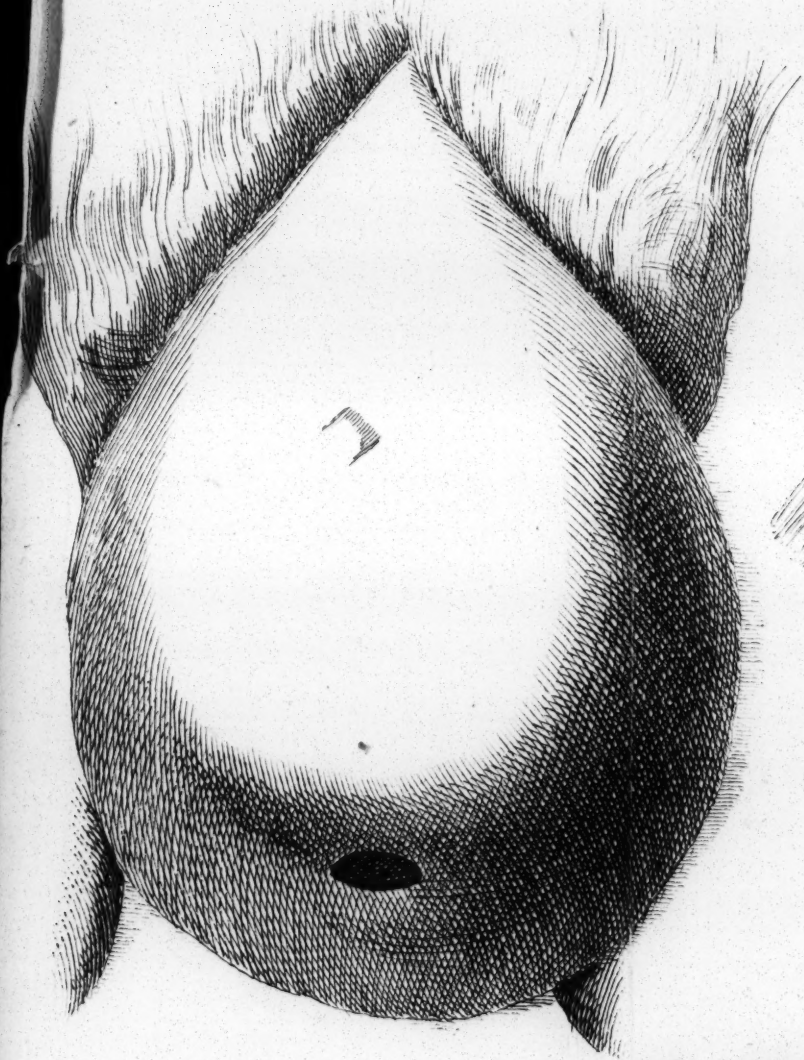
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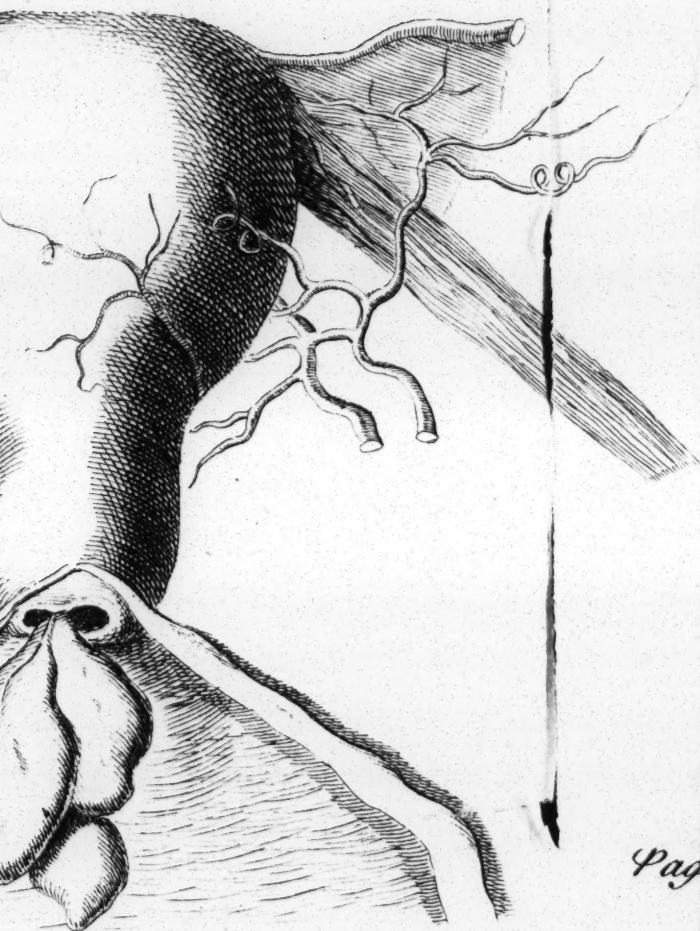
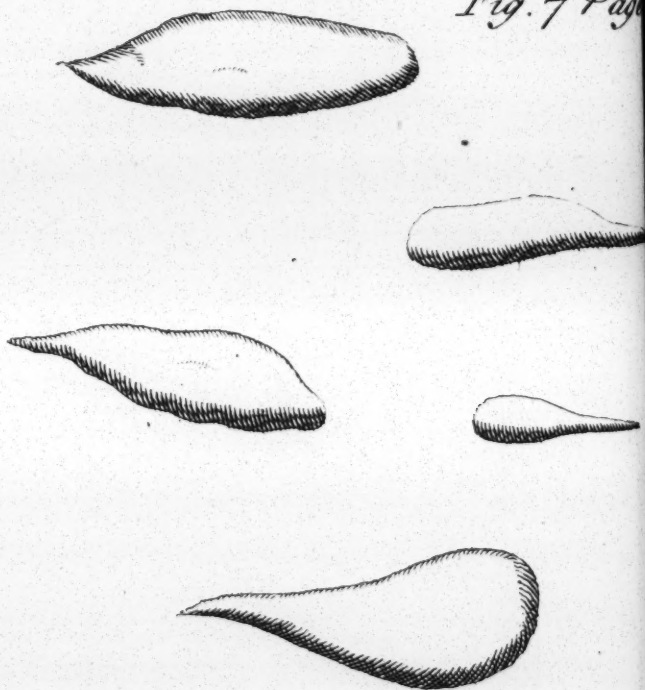
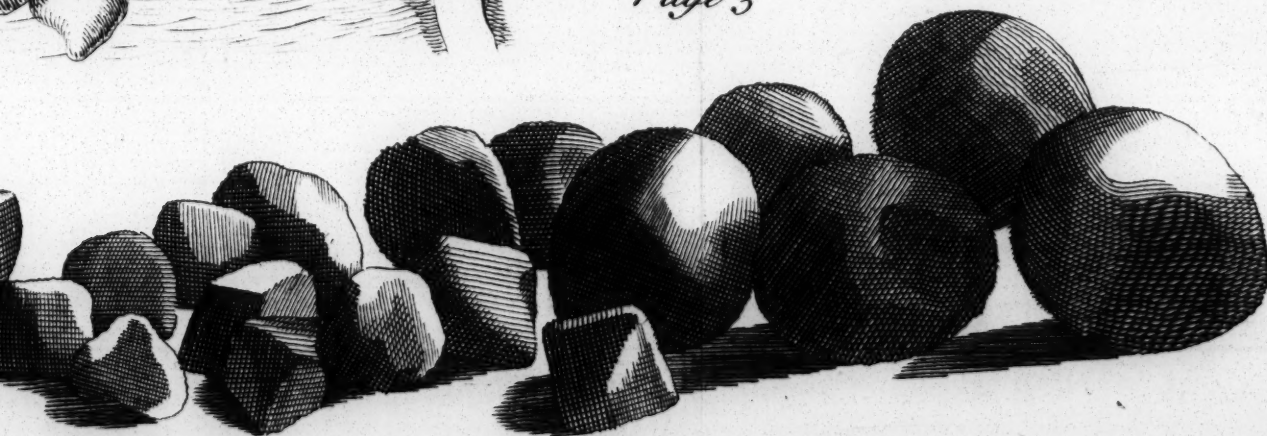
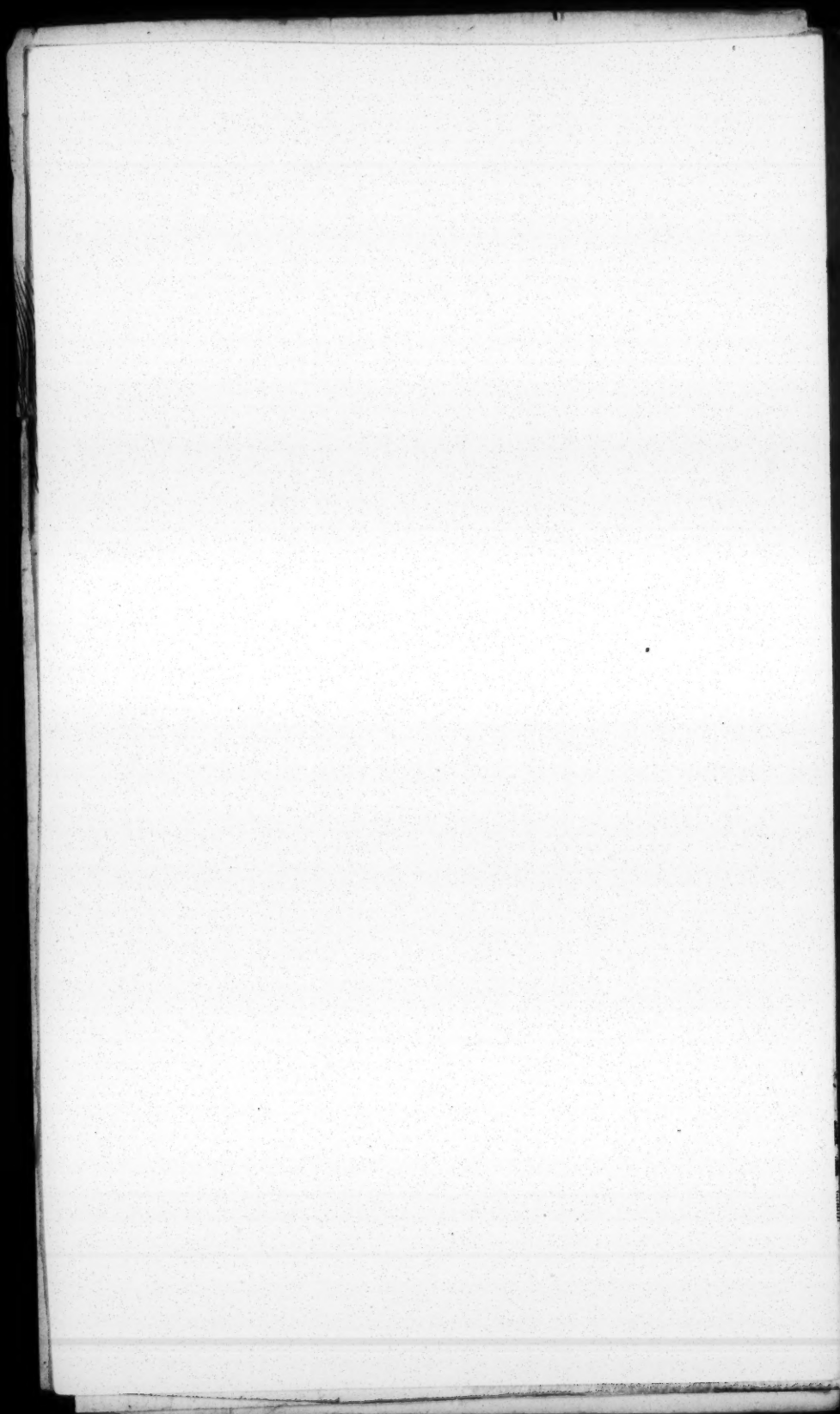


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THE CELEBRATED
Dr. Frederic Ruysch's
 PRACTICAL OBSERVATIONS
 I N
Surgery and Midwifry, &c.



OBSERVATION I.

A surprising Number of Stones extracted by Incision from a Woman eighty Years old.

A MONG all Disorders which usually afflict human Bodies, the Stone of the Bladder is one of the most
 B grie-

grievous ; although this Disorder is very frequent with us in *Holland*, yet it appeared to us in a very extraordinary and unheard of Manner, in a Woman of eighty Years old ; who was by reason of the Pain very much emaciated, and who had been for the Space of Twenty Years troubled with a Prolapsus Uteri, accompanied with an intolerable Difficulty and Pain in making Water, insomuch that the Patient had ten Times rather die than any longer suffer this Torture, especially during the two latter Years.

At length in the Month of *May*, Anno 1681, she sent for me, complaining of a Prolapsus Uteri, and Difficulty in making Water. I wondered at the old Woman's Complaints, because Women are never used to suffer such Pains, only from a Prolapsus Uteri ; and I added, that it was to be feared, some other Disorder, besides the subsiding of the Uterus, lay as yet concealed in Obscurity. When she heard this, the Patient did not refuse to let me see and farther examine the
Parts,

Parts, without which nothing certain could be affirmed concerning the Nature or Essence of the latent Malady; and she likewise shewed me her Uterus prolapsed, a little more enlarged than it ought to be, being of the same Form and Magnitude with the subjoined Figure. In examining this Uterus with my Fingers, I thought I could feel Stones, as indeed it happened, notwithstanding I was mistaken with respect to the Figure of the Stones; for they seem'd to me like thin Plates, or flat Stones, or like Pieces of Slate, whereas after Incision they were found thick and angular, as may appear from the annexed Figure which follows. But as yet I could not certainly determine whether the forementioned Stones were seated in the Cavity of the Uterus itself, or whether they were lodged betwixt its Membranes, or else in some Part of the Bladder. They seem'd indeed to occupy Part of the Uterus, the whole of which, as far as we could perceive, prolapsed out of the Body with-

out being accompanied with any Part of the Bladder. Having seen and examined these Particulars, I proposed cutting out of the Stones, and Mr. *Peter Adrian* the younger, with Mr. *Andrew Boekelman*, being called, two very expert Surgeons, they likewise approved of the Operation to be performed the next Day. When the unfortunate old Woman heard the Operation was deferred till the next Day, she began to weep and cry out; O how miserable am I! will you leave me without Help, or not return speedily, &c. By which, and the like Complaints, being moved with Compassion, we instantly performed the Operation by a simple Incision, continued according to the Length of the prolapsed Uterus; and by that Means we extracted in the Space of a Minute, Forty-two Stones, partly by Instruments, and partly by the Fingers alone, the Magnitude and Figure of which Stones were various.

During the Operation, the Patient did not complain much of Pain, and after it

was

was performed, by being freed of the oppressing Weight, these excruciating Pains vanished, with which she had been tortured so many Years past, so that she began to live with tolerable Ease. In making the Incision, there was a Sort of Liquor flowed from the Wound, together with the Drops of Blood, from whence we suspected that the Bladder was also at Hand, as indeed it proved; for the next Day, in making more diligent Enquiry into this Affair, by injecting a Liquor with a Syringe through the Meatus Urinarius, we found that it discharged itself through the Wound; which Liquor distilling together with the Urine, through the Wound for several Days afterwards, made it evident to us, that the forementioned Stones were lodged in a Portion of the Bladder prolapsed without the Labia, in Company with the Uterus.

The continual Discharge of the Urine this Way, proved a great Obstacle to us in the Cure of the Wound; which yet

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was compleated in a short Time by the following Method.

Some Days after the Wound had been dressed with Linimentum Arcaei, the Lips thereof were approximated and retained very closely together by Emplastrum Diapalma, to which was added a little Turpentine to make it stick the more firmly; which Plaister was cut into a Shape, and retained with suitable Compresses and a convenient Bandage.

But as this Method did not sufficiently answer our Expectation, because of the continual dripping of Urine, and Relaxation of the sticking Plaisters; therefore Mr. *Boekelman* contrived a Leaden Ring instead of the Emplaister, the crooked Extremities of which Ring were drawn together by a Thread, by which Means the Lips of the Wound were so strictly closed, that none of the Urine was any longer discharged, and thus the Wound agglutinated within the Space of three Days.

In

In this Disorder there are several Things which deserve to be remarked, and which are even surprising, such as,

1. That the Uterus prolapsing out of the Body, should take with it so large a Part of the Bladder; which is certainly a Thing very rarely, if ever observed before, notwithstanding these two Bodies, or Viscera, are continuous together near the Os tincæ. But I believe this to have happened in the present old Woman, by Reason of the Difficulty in her making Water, proceeding from the great Number of Stones; whence she was continually obliged to strain violently to discharge her Urine, by which Force, and the fore-mentioned Cohesion of the Bladder, it could not be hindered from descending.

2. It is remarkable that the Tumor prolapsing out of the Body, resembled nothing but the Uterus, receiving no Inequality nor Change in Figure either from the Magnitude or Number of the Stones; for the Surface of the Tumor

8 *Practical Observations*

was extremely equal, the Uterus retaining its natural Figure.

3. It is surprising that all the Stones should be nearly of the same Figure, having their Surfaces as smooth as if they had been polished.

4. That the Wound was very readily brought to heal, although it was inflicted upon the membraneous Part of the Bladder, into which the Urine is continually distilling.

5. It is to be observed, that all the Stones were not lodged in that Part of the Bladder, which investing the Uterus above, was prolapsed together with the same out of the Body; for the prolapsed Part of the Bladder was not large enough in Proportion to the Magnitude and Number of the Stones, some of which doubtless descended in the Operation from the Fundus of the Bladder above.

6. That it is a Thing almost unknown or scarce heard of, for Lithotomy to be performed with so much Success, in a Woman of so many Years of Age. We
often

often indeed hear of Stones extracted from Women, by dilating the Urethra, but it is very rarely that an Incision is made through the Bladder, to extract the Stone contained therein.



O B S E R V A T. II.

*A dangerous Aneurysm of the Arm
happily cured.*

THAT Tumor which arising from the Dilatation of a Vein, is termed a Varix, the same is called an Aneurysm, when it arises from a preternatural Expansion of an Artery; which last Disorder so difficultly admits of a Cure, that when seated in the larger Arteries, it may by all be justly pronounced mortal.

Mr. *Panbuse*, an Ale-Seller at *Dort*, of a full Habit, and in the Flower of his Age, had an Aneurysm appeared in his

right Arm; after Bleeding in the basilick Vein of the same Arm, in the Month of *May* 1681, appearing about the Size of a large Pea, a little below the Bend of the Elbow. The Surgeon first endeavoured to restrain this Tumor by Compressure, according to the Rules of Art, but to no Purpose, for it grew larger daily. In a few Days after, he came to *Amsterdam*, and consulted Dr. *Le Blon*, myself and Mr. *Peter Adrian* the younger, who unanimously agreed in recommending an Incision through the Skin, and tying up of the Artery; which is an Operation more recommended than practised by Authors: Which I say the more readily, because for these twenty Years and more past, I do not know that this Operation has been performed by any Surgeon upon so large an Artery, even throughout this vast City of *Amsterdam*, to which the afflicted run together in great Numbers from all Parts. The Patient last mentioned, who was in other Respects generous, delayed the Operation,

tion, referring a slight Compressure of the Tumor, 'till after a Day or two the dilated Artery burst spontaneously, being bare and not covered with the Skin. The Aneurysm being thus spontaneously broke, the Blood flowed with great Impetuosity from the Orifice, until the 'forementioned Surgeon suppressed any further Hæmorrhage, by the Application of Puff-ball and convenient Bandage. The Patient perceiving this, reasonably began to think that he could not sustain this Malady long, without losing his Strength, and even hazarding his Life, and therefore consented to the Operation, which we proposed to be performed the Day after, as it accordingly was in the Presence of Dr. *Cyprianus*, Lithotomist in ordinary, with whom Mr. *Peter Adrian* before-mentioned assisted. In the first Place was applied an Iron Ring (covered with soft Leather, to prevent it from injuring the Skin) to the upper Part of the Arm, above the Aneurysm, to suppress the rapid Motion of the Blood;

but this Instrument not answering our Expectations as it ought, we had therefore Recourse to another, by which we sufficiently well compressed the Artery. This last Instrument being applied, Mr. *Peter Adrian* gently removed the Bandages, Compresses and Puff-ball from the Aneurysm, with a Design that if the Impetuosity of the Blood should be so great as to be incapable of being suppressed, or that if we should be in Danger of having the Parts obscured by an Hæmorrhage before the Artery was tied up, he might instantly open the Aneurysm, and fill its Cavity with a little red Precipitate, or some other *Exarotic*^{sc} mixed with Puff-ball. But to our great Astonishment, when the Aneurysm was laid bare of all its Compresses and Bandages, it discharged little or no Blood, because the Blood contained was not only grumous and concreted in the Aneurysm, but also throughout the whole Arm, which was now invaded with a Gangrene; seeing this, and having removed the Instrument,

ment, which was to restrain the Hæ-morrhage, he pressed out much of the congealed Blood through the Wound of the Aneurysm, and also made a pretty deep Incision, according to the Length of the Arm, that by discharging the congealed Blood downward by a gentle Compressure upon the Artery, the rest of the vital Blood might have a free Course through the same in order to remove the Gangrene. This Incision being made, the arterial Blood burst out with great Force in two different Places, the Extremities of the injured Arteries were next tied up with a Needle and Thread; (but how difficult it is to free the Arteries from the Nerves and other adjacent Parts in this Operation, no one can be sensible who has not been present at the Operation itself) and betwixt the Ligatures was intercepted a Bit of strong Leather, to prevent them from cutting through the Artery: This being performed, the Wound was filled with Puff-ball and astringent Powders, retained
with

with Compresses and a loose Bandage ; but to prevent any further Fear of a Gangrene, the Dressings were compressed only by the Hands of a Servant for the Space of ten Hours, to prevent any fresh Hæmorrhage. Upon the Evening of the same Day, the Bandage, Compresses, and some Parts of the Puff-ball were removed, that we might have an Opportunity of viewing the Condition of the Gangrene, which we found rather better than worse. After the Dressings were renewed, the Servant again continued his Compressures by the Hands, 'till the next Day we renewed the whole Apparatus, except a small Piece of the Puff ball which was left in that Part of the Wound, where there continued Danger of an Hæmorrhage. On the third Day after all the Dressings were removed, the Surgeon applied a fresh Piece of Puff-ball to the same Place, and applied the Bandage a little tighter round the Part, so that it was no longer necessary to continue the Pressure by the Hands of
a Ser-

a Servant, and in the mean Time we treated the Gangrene with scraped Lint, moisten'd with a Solution of Theriaca, in Spirit of Wine. On the fourth Day we omitted the Puff-ball, and with a Pair of Scissars divided the lower Thread or Ligature, with which the extreme Part of the Artery was tied up, leaving the Piece of Leather before-mentioned upon the Artery, to which it firmly adhered until the Evening: On the fifth Day we removed the other Thread which tied up the superior Part of the Artery, leaving the Piece of Leather still remaining, which prevented the Thread from cutting through the Coats of the Vessel. On the sixth Day we removed all the Dressings entirely from the Wound, and applied only Pledgets spread with Digestives, and retained with suitable Compresses and Bandage. On the seventh Day a slight Hæmorrhage appeared, which we soon suppressed by the Application of Puff-ball and astringent Powders; but upon removing these Astringents
from

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from the Bottom of the Wound, upon the next Day, we could perceive the Extremities of the Arteries which had been before tied up, but which were now closed, appearing of a dark Colour, as if invaded with a Gangrene; and therefore to these Extremities of the Arteries we applied scraped Lint, applying over that a Piece of thick Leather, to make the greater Compressure. On the following Day, instead of that Apparatus, we used a square Piece of Puff-ball, in Magnitude equal to half an Inch, and being first moistened on one Side with Saliva, it was armed with astringent Powders, while the other Side of the same Piece was secured with a sticking Plaister. By the Use of these Remedies, the Ends of the injured Arteries began to close up, and to be spread over or concealed from the Sight with a kind of new Flesh; but notwithstanding this, in a few Days after both these Extremities offered themselves to View, having degenerated again into two new Aneurysms,
by

by reason of the Softness or Laxity of the forementioned Flesh, together with a Largeness of the Pulse and Abundance of Blood. One of these Aneurysms, about the Size of a large Pea, burst of its own Accord, but did not bleed profusely, because soon compressed by the Surgeon; and in a few Days after, by bleeding and ordering a thin Diet, with a due Compressure, that Aneurysm was cured; though the other, notwithstanding it was compressed, could not be cured for many Days: But at length that also disappeared, and the Patient perfectly recovered, living afterwards in Health, and without Danger from this Accident.

O B S E R-

OBSERVAT. III.

A Fracture of the Patella from a remarkable Cause.

SOME have asserted that the Patella is scarce frangible, upon Account of its Hardness; but we have seen a Fracture of this Bone, not only from a violent Cause, such as a Fall, but also without a Fall; of which we shall here relate the History. I formerly visited with Mr. *Peter Adrian* the younger, a strong Man, who in descending a Pair of Stairs, one of his Feet slipped, and he had like to have tumbled upon the Ground, but by resisting as much as he was able, saved himself from falling, and yet by that violent Resistance or Straining, his Patella was fractured transversely in so manifest Degree, that one might thrust their Hand betwixt the two Fragments, one of which might be felt above the Knee, and the other below. The very skilful Surgeon

geon Mr. *Peter Adrian* before-mentioned, reduced and bound up the Fracture agreeable to the Rules of Art, but the impatient Man walked the next Day into the Country, from whence he returned with an incurable Lameness after some Weeks, halting ever afterwards. I have been formerly surprized at the Softness of the Patella in the recent Body, in comparison with the Hardness which we observe in that Bone with a Skeleton; and I have a second Time examined the Difference, in respect to the Firmness of a recent and dry Patella, in Company with the celebrated Physician Dr. *Matthew Slade*, when we found the Difference in Hardness to be almost infinite. The Error therefore which has led many People to doubt, whether the Patella can be ever fractured, seems to have proceeded from examining that Bone in the dry Skeleton only. For by drying, the Bones are so much hardened, that it is very difficult to break them, whereas they may be divided by a small Force, while

while they are moist and recent; for whoever has examined the Difference betwixt a recent and dry Patella, will find that the former is covered only with a hard bony Crust on the Outside, which is filled internally with a soft spongy Substance, like the Diploe of the Cranium.



OBSERVAT. IV.

A Fracture of two Bones of the Carpus, not yet conjoined after three Years.

IT is well known that Fractures of the larger Bones, as of the Arms and Legs, do sometimes happen under such Circumstances of Body, that they never after conjoin, even though they are treated agreeable to the Rules of Art: But it is something surprising, that the
Bones

Bones of the Carpus which are so very small, being fractured by a Fall from on high, were not conjoined together, even after the Space of three Years. In the Year 1681, a certain Robber was condemned to be hanged for Theft, whom I visited while in Prison, to enquire of him whether he had been afflicted with any remarkable Disorders during his Life. He answered that he had lived very well, never being afflicted with any Disorder but a Fever, of which he lay ill some Years before; and besides, said he, my right Hand I have never been able to extend flat upon the Table, since I fell from a high Place. In this executed Body I found the Membrane which invests the Spleen so thick in two Places of its Middle, that it was more than equal to the Thickness of the largest writing Quill, whereas it is naturally very thin, which Thickness there is no Room to doubt, proceeded from an Inflammation there, from which Disorder we often observe the Membranes incrassated;

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fated ; but whether or no this Inflammation proceeded from the fore-mentioned Fever, or the Fever from that Inflammation, I cannot determine. I afterwards laid open his Hand by the Knife, and found two of the interior Bones of the Carpus fractured ; and the Fragments injuring the Articulation of the Hand, were an Obstacle preventing the Hand from being spread flat upon a Table ; and what is still more surprising, the forementioned Bones having been fractured three Years before, were not yet cemented or conjoined, nor were they covered with any Callus, as any one may see in my Repository where they are kept.

O B S E R-

OBSERVAT. V.

The Scull laid bare, and though fouled or turned black from the Air, yet healed without any visible Exfoliation.

THIS Observation seems to prove, that the Bones of the Scull being laid bare, and rendered black or foul by the external Air, do not always make any sensible Exfoliation, by casting off the discoloured Scale or Plate of the Bone as Authors assert. A certain Man received a Blow by a Kick from a Horse, upon the Head, by which he fell down upon the Ground as one dead, with so large a Part of one of the parietal Bones laid bare, that it could scarce be covered by a Crown Piece: All the naked Part of the Bone looked black, except the Margin or Circle to which the Skin next adhered, and which retained its natural Colour for the Breadth of a Straw. This
white

white Circle lessening from Day to Day, the Patient at length recovered without any visible Exfoliation of the Bone, or Use of the Raspatory, only with the Use of dry scraped Lint to cover the naked Bone, spreading the Margin of the Lint next the Lips of the Wound with a Digestive mixed with Mel Rosarum.



OBSERVAT. VI.

A fleshy Polypus of the Uterus.

AS the Nostrils are an Emunctory of the Body, by which superfluous Humours are continually evacuated, so also the Uterus is well known to perform the same Offices. In the Nostrils we frequently meet with preternatural Tumors growing out under the Denomination of a Polypus, nor is the Uterus free from
the

the like fleshy Excrescencies. All Polypus's growing out of the Nostrils are not of the same Kind, some being of a fleshy Substance, and others on the contrary, of a phlegmatic or chalky Substance, involved in a fleshy Membrane. Sometimes also the Polypus is malignant and cancerous, and at other Times we find them without any Malignity. In the Year 1673, I was called to a Woman who had been a long Time afflicted with the Fluor Albus to an excessive Degree, and who at present laboured under a Prolapsus Uteri: from the internal Orifice of which grew various Excrescencies, pendulous, and of a Substance partly membranous, and partly fleshy, as represented in Fig. 6; and these from their Similitude to polypous Excrescencies in the Nostrils, I judged might be aptly called by the same Name. So painful were these Polypus's, and so great a Quantity of a watery and acrimonious Humour was discharged daily from the Uterus, that the common Remedies were

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of

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of no Service, while at the same Time we were deterred from the Use of more powerful Means from the Signs of Malignity in these Tumors, which was reasonably suspected, as we learnt from the Event; for a malignant Ulcer hastened the Patient's Death, and she soon after expired. Much of this Nature seemed to have been those polypous Tumors represented at Fig. 7, which were discharged at several Times by a Woman dwelling at *Wormerwere*, and sent me by a Surgeon of the same Place.



O B S E R V A T. VII.

A Schirrhbus and disfigured Uterus distended to a great Bulk, and hanging pendulous without the Pudenda.

A Woman of about thirty Years of Age, had her Uterus prolapsed, and

and so much enlarged, that she was scarce able to walk from the Uneasiness which it gave. It was advised and agreed upon to attempt an Extirpation of this Uterus, after making a Ligature thereupon. In order to this therefore the Operation was begun by making a strong Ligature upon the Uterus, which hung pendulous out of the Body, by passing a Needle round armed with a Thread three Times doubled; but I wish the Operator had intercepted nothing more than the Uterus with his Needle and Thread: The Patient for a Day or two discharged no Urine, which gave us Reason to suspect that the Urethra was constricted together with the Needle and Thread, as indeed the Event demonstrated. The unfortunate Patient expiring soon after, I opened the Body, and found that our Conjecture was not without Foundation; namely, that the Meatus Urinarius was so strictly intercepted together with the Uterus by the Ligature, that she was not able to discharge any Urine. Here I had a proper

Opportunity to enquire into the Notion which one ought to form concerning a Prolapſion of the Uterus; for it is well known, that many Phyſicians and Surgeons deny that the Uterus itſelf can ever prolapſe out of the Body. Among thoſe who aſſert the contrary, there are ſome who affirm the Uterus to be inverted as well as prolapſed; and others who ſay, that a Prolapſion of the Uterus is nothing but a bearing down of the Vagina. This Difference was decided by opening the Body of this unfortunate Woman; for in the lower Part of the Abdomen, the Pelvis, which is the natural Seat of the Uterus, we could ſee nothing but one of the Ovaries, with its annexed Tube and broad Ligament. But the whole Uterus was prolapſed out of the Body, but not inverted, being ſo much diſfigured and enlarged, that no one before the opening of the Body would have pronounced it to be the Uterus, if they had not obſerved the Os tinæ in the Middle of the Bottom Part, from whence
by

by a slight Pressure, a few Drops of Blood were expelled. What I have further observed concerning a Prolapsion and Inversion of the Uterus and Vagina, will be made evident in the following Cases.



OBSERVAT. VIII.

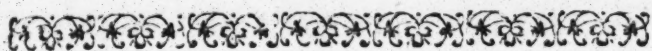
A Sheep's Bladder divided as it were into two.

I Never indeed observed the urinary Bladder to be double in the human Body; but I have sometimes found it partitioned into two in Brutes, some Specimens of which I keep by me. If we search after the Cause of this Duplicity, it will be easy for us to infer, that it may take Place more readily in the Bodies of Quadrupeds than of Men; for it is well known, that Quadrupeds only have the Urachus Pervivus, which

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Urachus being extended or dilated, either in or before the Birth, the Fundus of the Bladder, from whence the Urachus arises, will not only remain open, but also the Urachus itself will be distended into so large a Receptacle by the Pressure of the Urine, that it may in a little Time resemble another Bladder; and thus the Bladder may become double in Appearance, as we found in a Sheep's Bladder, divided as it were into two Parts from the forementioned Cause, by the Intervention of a thin round Membrane, in the bottom Part of which is a small Aperture to be seen, through whose opening there is a free Passage for the Urine to pass into either Cavity.

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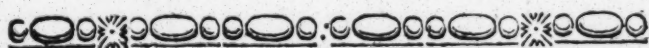
OBSERVAT. IX.

A true Prolapsion of the Uterus at Intervals out of the Body.

A Certain Woman some Years ago, passing through a Ditch, had a Prolapsion of the whole Uterus, a Magnitude and Figure of which is here annexed, that no one might hereafter doubt of, or deny the Possibility of a Prolapsus Uteri. The unfortunate Woman not being able to walk any further, sat down before the Door of the celebrated Professor *Francius* 'till the Evening drew on, whence the Maid took Occasion to ask what Misfortune had befallen her, and why she staid so long before the House; whereupon she made no Scruple to acquaint the Maid with the Accident, who soon communicated it to her Mistress,

the Mother of the aforesaid Professor, and she being moved with Compassion, took the poor Woman into her House, ordering a Midwife in the mean Time to be called, to replace the prolapsed Uterus, who indeed miscarried in her Attempt, because the Uterus was so much enlarged: But I being afterwards sent for, reduced the same to its natural Situation, and after properly securing the Parts, the Patient returned home without any notable Inconvenience. But certain it is, that the Uterus cannot always be reduced, if it is continued prolapsed out of the Body for a considerable Time; nor is it always proper to attempt a Reduction of the Uterus, as those well know who before they undertake the Operation, always enquire after the different State or Condition of the prolapsed Uterus, which if it is continued out of the Body so long as to be greatly enlarged, so that it cannot be easily reduced to its former Seat, or if the Uterus is indurated, fissured, or ulcerated

rated by long continuing out of the Body, the Reduction is not to be attempted, because the Patient is generally found much worse afterwards.



OBSERVAT. X.

An Inversion of the Uterus in the Delivery.

AMong the lamentable Disasters to which Women are obnoxious, a total Inversion of the Uterus is none of the least, which can never happen but either in, or soon after the Birth. If this Accident is not immediately remedied, Death presently follows. I remember myself to have met twice with this Accident in a Week, and if the Midwife is not ready to give immediate Assistance, the Case is desperate, nor did ever any recover, except the Wife of a

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certain Jew; for the Hæmorrhage is generally so profuse from the prolapsed Uterus, that it immediately becomes inflamed and indurated, whence an incipient Gangrene follows from the obstructed Circulation of the Blood. In the Case of which we are now speaking, the whole Uterus was inverted in the Delivery, which it is not in a Prolapsus without the Pudenda; for in this last Case, the Uterus is not inverted, but only subsides; so that the internal Os tincæ may be perceived in the Bottom of the prolapsed Uterus. But in this Case the Os uteri is neither perceived nor visible to the Eye. This Injury sometimes arises from unexperienced Midwives drawing the navel String more violently than it ought, whence the Uterus must consequently follow. Sometimes also a Prolapsion follows from the Strainings after the Birth. This Accident happened once to myself during the Time I practised Midwifry, when I extracted a dead Foetus, together with
the

the Placenta, whereupon the Uterus soon after subsided and came into View, which I immediately reduced, and placing the Thighs together, according to the Rules of Art, the Patient was in a little Time cured. The Reader has not the least Room to doubt, that not only Midwives, but also Surgeons and Physicians have been equally deceived in respect to the present Accident. A certain Surgeon not long ago sent for me in a Case of this Nature, because he could not conjecture what Sort of a Tumor it was that hung pendulous out of the Body. I have been likewise sent for oftentimes by Midwives, whom I have found full of Wonder, to think what Sort of a Tumor it was that appeared after the Birth; for some of them have said to me when I came, you will see a large Mola, firmly adhering to the Uterus; and others have said, we have here a monstrous Birth, &c. I have therefore taken Care to represent this Disorder more particularly, that no one might any longer continue ignorant

or be deceived in a Matter of so great Moment, which requires a most speedy Relief.



OBSERVAT. XI.

A Foetus killed by a wonderful Contortion of the Funiculus Umbilicalis.

AS Man after Birth is threatened with innumerable Causes of Death, so there are also not a few Causes both of Death and Diseases which threaten the Fœtus, while yet contained in the Womb. Among these last, a Contortion of the Funiculus Umbilicalis is of the greatest Consequence. A dead Fœtus was lately brought away, with the Membranes of the Chorion, and Amnios entire, the umbilical Chord of which I found wonderfully contorted in the
same

same Manner as we see in common Pack-thread after twisting it well, and then applying the two Ends together, one Part of the Chord twisting itself round the other. It is very probable, that this Disaster proceeded from a more frequent turning round of the Foetus in the Uterus, and that this was the Cause of it's Death, by intercepting intirely the Circulation of the Blood through the vascular Rope.



OBSERVAT. XII.

A malignant Ulcer, or Mortification of the Uterus.

AMong the many Disasters which afflict the Bodies of Women, an Ulcer of the Uterus is none of the least. In the Year 1671, I visited a Woman who for some Weeks past had contracted
an

an Ulcer in the Uterus, attended with so great and continual a Bleeding, as rendered the Case quite surprising. The intolerable Pains which she felt in these Parts made her often wish for Death, which at length indeed put an End to her Miseries, after all Remedies were tried to no Purpose on Account of the inconvenient Situation of the Malady, and continual Flux of Humours from the Part. After opening the Body, the Neck of the Uterus separated from it's Body by touching it as if it was entirely putrefied. The Intestines were externally joined together by a brevius Excoriation and Inflammation; but the other Parts were found natural and sound enough. I have, since the Observation of this, met with several of the like Ulcerations or Gangrenes of the Uterus, which are deservedly esteemed mortal, since they are attended not only with such excruciating Pains, but also with such Strainings to empty the Abdomen, as are most violent, so that the Patient being insupportable

portable of the Disorder, had much rather die than live.

OBSERVAT. XIII.

A Diabetes from an ill Disposition of the Kidneys.

A Man in the Flower of his Age, being a long Time afflicted with excruciating Nephritic Pains, terminating in Abscess of the Kidneys, fell at length into a Diabetes. He made no Difficulty in drinking half a Hogshead of Ale in a Week. After the Death of this Patient, his Relations gave me an Opportunity of opening the Body, in which I found the Viscera well enough disposed, except the Kidneys and Ureters; for both the Kidneys were partly consumed, more especially the right, the Substance of which was plainly dissolved, and entirely consumed, leaving only it's Membranes

branes much increffated and contracted to the Capacity of the Pelvis: The Ureters were alfo very much diftorted, and in many Places dilated, or expanded more than in others.

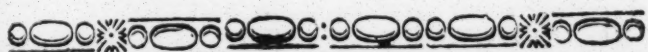


O B S E R V A T. XIV.

An Instance of Superfætation.

THE Wife of a certain Surgeon at *Amsterdam*, in the Year 1686, brought forth a robust living Infant, and within fix Hours after this Birth, she brought forth likewise an Embryo of a considerable Figure and Magnitude. In this Embryo it was remarkable, first, that the Funiculus Umbilicalis resembled so many Hydatides, so that the whole seem'd to be a Chain of Vesicles, filled with a watery Humour; but from whence came this? Secondly, I observed
the

the Placenta of such a Thickness and Magnitude, that one should seldom see it thicker or larger in a Foetus of three Months old.



OBSERVAT. XV.

A fatal Ischuria from Stones lodged in the Ureter.

HOW deplorable a Malady the Stone of the Bladder is, is well known to every Surgeon; but still much more cruel is the Stone of the Kidneys, when it is of such Magnitude, as not to be capable of passing through the Ureter; because in this last Case the Patient can receive no Relief, either from the Skill of the Physician, or Hand of the Surgeon. Of this we had an Instance of a certain Surgeon at *Amsterdam*, in the Year 1682, who, being a long Time afflicted

afflicted with nephritic Complaints, discharged many small Stones; but at length fell into a spurious Ischuria, from which he was once relieved by the Use of a Semicupium, but being afterwards seized with most intense Pains of the Abdomen and Legs, with a vomiting of a black coloured Matter, at last expired.

Upon opening the Body, I found two Stones in the right Kidney, and one in the left Ureter, which last was of the Magnitude and Figure of an Olive, having its Surface encompassed with many small Calculi or Particles of Gravel, which entirely intercepted the Passage of the Urine into the Bladder.

The upper Part of the Ureter above the Stone, was very much dilated, by Reason of the frequent Passage of Calculi that Way; but below, the Ureter was of its natural Capacity, but more red than it ought to be, having suffered an Inflammation. The Kidney of the same Ureter was also of a monstrous Bulk, and appeared filled, as did also the greatest
Part

Part of the Ureter, with a watery Humour, the Motion of which Humour the Patient frequently perceived, as he told us, upon moving his Body.



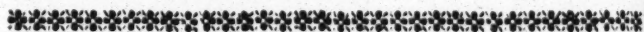
OBSERVAT. XVI.

*A Prolapsus of one of the Ovaria,
after opening an Abscess penetrating
too deep into the Abdomen.*

HOW necessary it is, both for the Surgeon, as well as the Anatomist, to operate with a light and suspended Hand, no one can be ignorant; for the Anatomist cautiously dissects the Parts, and the Surgeon ought to use no less Circumspection in performing his Operations. I knew a certain Surgeon, who when living was very rash in his Practice, he in an Abscess in the lateral and lower Part of the Hypogastrium, made a large
Aper-

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Aperture with a Lancet, thrusting the Instrument so deep, that it penetrated even into the Cavity of the Abdomen, after which one of the Ovaries burst forth from the Cavity of the Body, together with a purulent Matter, which I having seen, and examined well with my Fingers, return'd the same again into its natural Place, without any notable Injury to the Patient, who complained of nothing on this Account afterwards.



OBSERVAT. XVII.

A Dropsy of the Ovarium in a Woman.

A Dropsy of the Ovarium, or rather of the Ova contained therein, if we may be allowed so to speak, is a Disorder well enough known to others if it was but duly considered. It usually passes under the Denomination of Hyd-
tides

rides with most Authors, to which Name I readily consent, provided we agree in the Disorder itself: This Disorder generally I observe seated for the most Part, if not always, in the Ova, which are so changed and increased in Bulk, that they are very often seen larger than the Head of an Infant. But how surprising is it, that this Change should happen in the Human Ova, which in a natural State are filled with a seminal Humour? Even the Brain itself and Glands I have sometimes observed degenerate into Hydatides, as is also evident from the Observations and Testimony of others. Hitherto we ought to refer the prodigious Hen's Egg extended in this Manner, which I keep in my Repository, as the Gift of the curious and learned Dr. *Almeloveen*, who called me to the Dissection of the Hen.

OBSER-

OBSERVAT. XVIII.

A hairy Tumor found in the Omentum.

IN the Year 1683, we opened the Body of a certain Woman, who had been for the Space of fifteen Years past, troubled with a Dropsy, by which her Abdomen was distended to the Circumference of three Ells, and the Blood-vessels of the Abdomen were increased in their Capacity and Thickness, beyond the Magnitude of the largest writing Quills: But this unfortunate Patient was lamentably afflicted during the whole Course of the fore mentioned Number of Years, 'till at length after many and intolerable Pains a Gangrene appeared above the Navel, by separating which, the Waters contained in the Abdomen burst forth with great Impetuosity, but without any remarkable Fœtor, or ill Smell. Mr. *Abel Vanderhorst*, a well experienced Surgeon, prevented any farther

ther Discharge by the Application of Compresses and sticking Plaisters; and that he might discharge the Water gradually, he extracted a sufficient Quantity every Quarter of an Hour. But in a few Hours after the Eruption of the Waters, they contracted such an intolerable Smell, as was insupportable to every one; and on the fourth or fifth Day after the Opening, the miserable Patient expired. The Relations consenting for us to open the Body, we found the Omentum fleshy and thick as one's Finger fastened to the Peritonæum, and including a Tumor as large as one's Fist, which being laid open according to its Length, there first appeared a small Quantity of a white thick Matter, without any ill Smell, which being discharged, we found the rest of the Tumor to be nothing but a Heap of Hairs curled and twisted together in an intricate Manner: These Hairs were of different Length, some of them not longer than one's Finger, and others were more than equal
to

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to a Span in length. These Hairs being viewed with a Microscope, were found to agree in all Respects with those of the Head, excepting that they had no Roots. In the other Viscera we met with nothing remarkable.



OBSERVAT. XIX.

An Orthopnoea arising from an Obstruction and Expansion of the Vesicles of the Lungs.

A Maid of about forty Years old, seemed for some Months past to be in a Manner suffocated with an Orthopnoea, accompanied with an Ascites, so that not only her Lips, but also her whole Face had contracted a very disagreeable livid Colour; and at length falling into Faintings she expired. By opening the Body we discovered the following Particulars:
That

That the Muscles of the Abdomen naturally incumbent upon each other, and very strictly cohering together, were in this Body so loosely connected, that they could easily separate them by the Fingers with a small Force, which is a Circumstance I have observed in many Bodies dying Dropsical. The watery Liquor contained in the Abdomen, being heated over the Fire, congealed like Lymph, or the White of an Egg. All the Fat throughout the whole Body was consumed, the Peritonæum was much thicker than usual, the Omentum scirrhus, and indurated, and the Intestines by long fasting, were contracted and reduced into a small Compass; but the spermatic Veins were so much dilated, that they would easily admit a writing Quill, which Circumstance I never before observed in Virgins, but have sometimes seen in gravid Women. The Membranes investing the Liver and Kidneys, were very hard and thick, the Gall Bladder was almost empty, and the Lungs adhered to the Pleura. But the Heart was found

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three Times larger than usual, with a great Quantity of Water included in the Pericardium, which being heated over the Fire, hardened like Lymph. The right Kidney was inverted, and in some Part of the Lungs I observed a Heap of pellucid Vehicles, so much obstructed and distended with the Air, that I could not easily compress them, or evacuate the Air. By blowing the Air strongly through the Aspera Arteria, some of those Vesicles were burst, and those of them which were obstructed, readily discharged their included Air, and subsided after they were perforated with the Point of a Needle.

O B S E R.

OBSERVAT. XX.

An Orthopnoea arising from an Obstruction of the Pulmonary Vesicles.

IN the Year 1685, in Company with that very skilful Physician Dr. Sylvius, and Mr. Young, an experienced Surgeon, I opened the Body of a certain Merchant, who for a long Time had been afflicted with a Dyspnoea, or Difficulty of breathing, accompanied with a Cough and slight continual Fever. This Disorder so much increased after he had accidentally tumbled into some Water, that in Process of Time he was scarce any longer able to breathe, and soon after he expired. In opening the Body, we observed that the whole Disorder consisted in an Obstruction of Part of the Lungs, in which all the Vesicles appeared stopped up and distended, so that the Air which they contained, could not pass freely in or out.

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OBSER.

OBSERVAT. XXI.

*The 'fore-mentioned Disorder observed
in a Child.*

IN the Year 1686, I dissected the Body of a Child about eight Years old (in Company with Mr. *Vanderburgh*, Merchant of *Amsterdam*) which had expired of the 'fore-mentioned Disorder; and in the Lungs of this Child we observed the Vesicles occluded as before, being grown together so as to intercept the Passage of the Air; whence I am apt to believe, that this Disorder more frequently afflicts Mankind than has hitherto been observed by Authors, and the more so, because the Relations of the deceased seldom permit the opening of the dead Body.

OBSER.

OBSERVAT. XXII.

A surprising Delivery, in which there was a preternatural Closure of the Passages; but opened by Art.

THAT a Woman should conceive, or become pregnant while the Womb itself hangs pendulous out of the Body, is not absolutely to be denied, because I once observed the same, in a Manner which I shall hereafter relate; yet is the Thing uncommon, and very rarely, if ever observed before. But I think it is no less extraordinary for a Woman to be impregnated, while the Membrane of the Hymen continues entire, and that even to the Time of the Birth; and still more extraordinary is it for the Vagina of the Uterus to be closed up by a preternatural Membrane, seated behind the Hymen, as we shall hereafter relate.

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In the Prince's Dyke, opposite that which is commonly called *de Angeliersgruft*, lived *John Peters*, Tobacconist, whose Name and Place of Abode I mention beyond my usual Method, because the History is so extraordinary, that it may excite the Admiration of every one, whereas I otherwise usually omit the Names, because it is displeasing to the Patients; the Wife of this Tobacconist being in Labour, could not be delivered even though her Throws and labour Pains were so vehement, that her Cries were heard all over the Street. At length I was called by two Midwives to her Assistance, for otherwise the miserable Patient must in Appearance have been lost in a little Time: Having examined after the Cause of the Difficulty of the Birth, I found that the Membrane of the Hymen was entire and very thick, being thrust outward by the Head of the Foetus which presented for the Birth. Having seen this, I judged that the aforesaid Membrane must be divid-

divided by Incision; and having called Mr. *Andrew Boekelman*, and Mr. *Peter Adrian* the younger, two of the most expert Surgeons, the latter coming first persuaded me to carry on the Incision immediately by a Pair of Scissars and Director, or grooved Probe to avoid injuring the Head of the Fœtus. This Incision being made in a right Line across the Membrane, from the Pubes towards the Anus, we in vain waited for the Exclusion of the Fœtus, for there was another preternatural and thick Membrane behind the former, which more deeply closed up the Passage of the Vagina, and obstructed the Exclusion of the Fœtus. Having discovered this Membrane, we judged there were but few Hopes of saving the Patient; but that the Mother might not be lost, together with the Fœtus, we made an Incision also through this last Membrane, whereupon the Operation was no sooner over than the living Fœtus was excluded, coming forth crying with Strength enough, and still con-

tinues alive and well. All this being performed to the great Relief of the Mother, who seemed to be about to expire, together with the Fœtus, though by this Operation both of them escaped. On the following Days the Patient complained of an Incontinency of Urine, which happened to her not from the 'fore-mentioned Incisions, but from the violent and long continued Distension of the Vulva and Sphincter of the Bladder, as appeared from the Event; for after some Weeks she did well, and still continues so, together with the Infant, of which she was delivered in this extraordinary Birth. In this Delivery we are to observe,

1. That the Membrane of the Hymen was not ruptured in coitu (of which there are various Instances to be found in the Anatomy of *Bartholin, Fol. 286.*) either from too great a Thickness of the Membrane, or from some other Cause, to be here pass'd over, that I may not exceed the Bounds of Modesty.

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2. That behind the 'fore-mentioned Membrane of the Hymen, the Vagina was closed up more deeply by a certain preternatural Membrane, which doubtless was formed after Impregnation, probably from an Excoriation of the Vagina, proceeding from some very acrid Humour; for we sometimes observe an Excoriation of the Vulva, whose Sides collapſing together extra coitu, not only grow together, but form a Sort of true membranous Production.

3. That the Incontinency of Urine, aroſe not from the Operation or Inciſion, but from the too great Diſtenſion of the Vulva, and it is very unjuſtly that ſome unſkilful Perſons impute every Incontinency of Urine, to the Midwife, or to the Surgeon who extracts the dead Fœtus; whereas it more frequently proceeds from the too great Diſtenſion of the Vagina, whence the Sphincter of the Bladder that firmly adheres to the Vagina, is ſo much extended, that the Mother is incapable of retaining her Urine for ſeveral Days,

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and sometimes even for Weeks. I have very frequently cured this Relaxation or Loss of Tone in the Sphincter of the Bladder, but it can be very rarely cured, if the Incontinency of Urine proceeds from a Gangrene, which Women in Child-bed frequently receive from a too violent and long continued Distraction of the Vulva, or immoderate pressing and grinding with the Fingers of the Midwife.



OBSERVAT. XXIII.

A monstrous Conformation of the Pudenda in a Girl.

IN the Year 1670, I visited a Girl of six Days old from the Birth, whose Pudenda was united with the Navel, or rather with that Part of the Body which was instead of the Navel; the whole
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being a confused Heap of excoriated Tubercles, in the lower Part of which appeared two Foramina, from whence the Urine continually distilled in Drops, especially when the Infant cried. There is no Room to doubt also, but that this Infant was destitute of any Bladder, because there was no Meatus Urinarius, the two Openings before-mentioned near the Navel being continued to the Ureters. This Misconformation of Parts, might perhaps arise from a Fright, the Mother having fallen from a high Place several Weeks before the Birth.

OBSERVAT. XXIV.

A lateral Part of the Uterus prolapsing in the Birth.

INnumerable are the Disorders of the Uterus, of which there are some so seldom observed, that we find no Mention of them among Authors; and among these less frequent Accidents, I think a true Prolapsion of the lateral Part of the Body of the Uterus in the Birth, ought to be enumerated, as I had once only an Opportunity of seeing. A certain Woman living in the broad Street of the *Jews*, being in Labour, had by violent Strainings a hard Tumor about the Size of a small Fist in the left Side only of the Vulva. The Midwife seeing this Tumor, and knowing not what to make of it, ordered me to be sent for. At first Sight it appeared to me like a Portion of the Placenta Uterina, which frequently presenting before the Foetus, I had

I had almost by that Means been led into a Mistake; but enquiring more diligently into the Affair, I found it to be truly a lateral Part of the Uterus, which was also proved by the Event; for after the Infant was delivered, the Uterus immediately returned to its natural Situation, and the Patient recovered without any Use of Fomentations, which we commonly apply to prevent any prolapsed Part of the Uterus from being invaded with a Gangrene.



OBSERVAT. XXV.

The Os tincæ, or Mouth of the Uterus, prolapsing in the Birth.

IT is well known that the Placenta Uterina, and sometimes even the Vagina itself often prolapse or subside before the Fœtus in the Time of Parturition;

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rition ; but it is more surprising for the internal Mouth of the Uterus to be forced down in the Birth, as I have sometimes observed. It is hardly expressible with what an uncommon Appearance the Os Uteri presents itself upon such an Occasion ; and those who have been present with myself at these Cases, know very well with what Circumspection and Care one ought to proceed in a Case of this Nature. In such a Case I think it most advisable to refer the Exclusion of the yet living Fœtus to Nature, sustaining the Os Uteri with both the Hands ; but if the Fœtus is dead, the whole Business will consist in extracting it as much as possible with one Hand, while the Os Uteri is sustained by the other, that it may not prolapse together with the Fœtus, and occasion an Inversion of the Womb, to which at that Time it is disposed.

O B S E R-

OBSERVAT. XXVI.

An Inversion of the Uterus in the Birth, rendered fatal by an unskilful Hand.

HOW badly those Patients consult their own Interest who commit the Care of their Bodies to unskilful and unsettled Practitioners, is evident from the daily Misfortunes which we experience, and especially from the following Observation. The Wife of a certain Butcher having lately brought forth a strong Infant, the Uterus itself immediately followed the Placenta, and was inverted, mentioned in Observation X, preceding. Hereupon an ignorant Medicafter was called, whose Name is not worth mentioning, as he will doubtless hardly ever be called again to a like deplorable Case. This Fellow, instead of replacing the Uterus into its proper Situation, cut

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a little Way into the Tumor with the Point of his Knife, in order to discover what it was, whether it was a preternatural Tumor, filled with Humours, or the Placenta Uterina, &c. This rash and unheard of Method of Enquiry, soon put an End to the Patient's Life, for so profuse an Hæmorrhage immediately followed, as was not supportable, nor capable of being suppressed by all my Endeavours with the most powerful Stagnotics ; but every Thing proving fruitless, in a few Hours after I was called, Faintings came on, and towards the latter End of the Day, the Patient expired.

O B S E R-

OBSERVAT. XXVII.

A Dropsy from an Assemblage of Hydatides, included in a Sacculus above the Stomach.

WHAT an Ascites is, included in the Membranes of the Abdomen, must be well known to every one who is at all versed in the Practice of Physic; but the Instance here alledged is not so common, being a kind of Bladder, or thick membranous Sack, filled with little Vesicles, containing an aqueous Humour, in Magnitude not much unlike to the Stomach, above which this Sacculus, with its contained Hydatides were seated; and this we observed in the Body of an asthmatic Patient, whose Respiration was so difficult, that he sometimes seemed to be about to expire with an Orthopnoea, which was accompanied with a slow Fever and frequent Heart-burns. Many of these Hydatides, which were of different
Sizes,

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Sizes, were found loose, and fluctuating within the fore-mentioned membranous Sack, and others were found firmly adhering to the Membranes of the said Sack.



O B S E R V A T. XXVIII.

Pseudomolæ, or spurious Mola's, from small Placenta's remaining in the Uterus after the Exclusion of the Fætus.

HOW many and how great Inconveniencies happen to Lying-in Women, when the Secundines, or Afterburthen do not follow the preceding mature Fætus, is no easy Matter to say; for some fall into a profuse and irregular Fluor Uterinus, which returns at Intervals from the same Cause, not without excruciating Pains. In others the Abdomen is distended to a great Bulk with a Difficulty of Respiration, an oedematous

matous Swelling at the Legs, Sicknefs at the Stomach, or loathing of the Food, with Anxieties of the Præcordia, fainting Fits, and Paleness of the Face ; and not unfrequently Death itself puts a Period to these Miseries ; whence the Disorder appears to be very dangerous, and of the last Consequence, but not mortal in itself, as some of the less skilful Midwives would have us believe. Very often the Placenta remains in the Uterus for above the Space of ten Months after the Foetus has been excluded ; and it is almost as incredible as surprising, what a Variety of Changes, or Transmutations, if I may so speak, the preternaturally retained Placenta undergoes. Sometimes the Placenta degenerates into Hydatides or Vesicles, hanging as it were like Foot-stalks, and with a watery Humour, as will appear in some of the future Observations ; and sometimes the retained Placenta is at length brought forth, and esteemed by others for a Mola, betwixt which there is a near Resemblance,
both

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both in Hardness, Consistence, Form and fleshy Substance, conformable to the Description of a Mola; so that it is no Wonder these Parts of the Placenta should be taken for Molæ by those who have no Opportunity of seeing daily with us these Placenta's which have been retained, exposed to View by anatomical Dissection. For from the first Time that I gave Lectures for the Use of Midwives in this vast City of *Amsterdam*, every rare and unusual Case which has fallen into their Hands, has been always brought to me by way of Recompence. But to return to our Subject; if the Placenta's of Fœtus's two, three, or four Months old are retained longer than they ought in the Uterus, they are not so much dangerous as apt to produce Alterations in the Patient. But if the Placenta of a mature Fœtus, or of one that is seven or eight Months old be retained, there is more Danger, because frequently the whole Placenta degenerates into Hydatides, the Number of which

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is sometimes so great, as to extend the Abdomen to such a Degree, that the Woman seems to be with Child. I remember myself to have twice seen a large Plate full of such Hydatides discharged from those who have retained Part of the Placenta in the Uterus for some Months after they have been delivered. I said before, that the Placenta's of Abortives, two, three, or four Months old, become of so compact a Substance, and acquire such a Form, that they may be well taken for Molæ by the Unskilful, provided they stay in the Uterus longer than they ought, or for many Days; for the Humours being expelled together with the Fœtus, the Placenta is contracted and pressed together by the Uterus, into this or that Form, so as to resemble either a Mole, a Frog, or some other Kind of Body, whence the over credulous Women, who are too much addicted to tell Stories and magnify Trifles, give out to their Acquaintance that they have met with living Molæ, capable of flying,

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flying; &c. and what is more, they admonish the rest of their Companions who are present at the Birth, to take Care of these Molæ, that they do not creep under their Cloaths, and insinuate themselves into their Bodies. But rejecting these Trifles of old Women, I think it worthy of Observation, that if these Placentulæ are retained a Week, or longer in the Uterus, after the Fœtus has been delivered, they are so compressed by the Contraction of the Womb, that they become not only more compact and solid than the muscular Flesh, but are by that Means moulded into the Form and Magnitude of the internal Cavity of the Uterus.

A certain Woman who had gone eleven Weeks with Child, as she reported to me, miscarried by a violent Passion of Mind, the Placentulæ still remaining for some Weeks in the Womb, by the Contraction of which in returning to its former Magnitude, the Placentæ were so much indurated and disfigured before
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it was discharged, that if one had not carefully examined its Substance, they would have readily believed it to be a Mola.

Another Woman in the fifth Month of her Pregnancy, brought forth an immature Fœtus, which was followed with the Secundines entire and well conditioned; but after these were come to light, there followed a fleshy Mass, in Form and Magnitude resembling the natural Uterus. Upon making a strict Examination into this last by Incision, I found it to be likewise a deformed Placenta, more compact than usual; but how long this second Placenta had continued in the Womb, is hard to say, whether or no the Woman might have had Twins, and one of the Fœtus's being destroyed or dropt without her Knowledge, its Placenta might have continued; or whether or no she was with Child before this last Impregnation, and having excluded the Embryo retained the Placenta, as many Times happens; all this is what
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we have no Opportunity here to determine. At least there is no Room to doubt, that after the Exclusion of the Foetus in these Cases, the Placenta being retained some Weeks in the Uterus, contracting to its former Dimensions, therefore receives the Figure and Dimensions of its internal Cavity. But if one of the 'fore-mentioned Placentula be retained for a few Days only, it becomes more compact and irregularly figured, so as to represent sometimes a Frog, sometimes a Mole, &c. according to People's Imaginations.

O B S E R-

OBSERVAT. XXIX.

A Mass of congealed Blood, in some Measure resembling a Mola, both in Colour and Compactness.

NOT only a Placenta retained in the Uterus for some time after the Exclusion of an Embryo may resemble a Mola, but also congealed Blood lodged in the Cavity of the Uterus, which has been frequently brought me by Midwives, sometimes for a Mola, and sometimes for a Placenta. This congealed Blood being much indurated by the Compressure of the Uterus, I have sometimes found it so compact, as to resemble Flesh, and have frequently observed a Sort of Membranes, in a Manner appended like those which we see swimming in the Water, after bleeding in the Foot. When these and such like Bodies are brought to me, I make the following Enquiries: 1. Whether there

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are any Footsteps of a Funiculus umbilicalis, or Navel-String which has been broke off; 2. Whether or no there are any blood Vessels distributed through the Mass, without which they cannot be termed retained Placentulæ, in which it is to be observed however, that if there are Blood-vessels, they generally contain no Blood, so that they seem more like Fibres than Blood-vessels.



OBSERVAT. XXX.

An Amputation of a cancerous Penis.

THE Uterus being prolapsed and enlarged to a monstrous Bulk, may evidently be extirpated according to the preceding Observations; which Operation however, should not be attempted without first introducing a Catheter into the Urethra, before a Ligature

ture is applied to the Uterus, lest that abominable ill Consequence should follow, mentioned in the seventh Observation preceding. No less practicable also is it to amputate the Penis of the Male, when it is dangerously corrupted, or mortified, provided the Operation be rightly performed. A certain Countryman who dwelt in the Suburbs, had two Years before a Scirrhus formed in the external Part of a Penis, which at length degenerated into an ulcerated Cancer, enlarging that Part of the Penis to such a Degree, that it was equal to one's Fist. Mr. *Jehoiakim Schrader*, an expert Surgeon, who had undertaken this Cure, called into Consultation the experienced Dr. *Hidding*, myself, and Mr. *Andrew Boekelman*, and his Son *Cornelius*. We unanimously recommended an Extirpation, which was accordingly performed the next Day, and with so much Success, that the Patient returned Home and now lives in Health, although deprived of his Penis. But this Opera-

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tion was performed in the following Manner; after introducing a Catheter through the Urethra into the Cavity of the Bladder, we made Ligature with a String upon the Penis, behind the diseased Part, the String being small indeed, but strong and forcibly tied. The Pains following were manfully supported by the Patient, for to the Surprise of all of us he made but little Noise. Having made this Ligature, he secured the Catheter in such a Manner with a Thread, that it could not well slip out of the Cavity of the Urethra. On the next Day we made a new Ligature, that the affected Part might the sooner mortify; and in the mean Time we wrapt up the Penis in a moist Bladder, to confine the ill Smell and to receive the Urine; and on the fifth Day, if I mistake not, the mortified Part was removed by the Scalpel, without any Hæmorrhage, since it was totally mortified. In the mean Time we left the Catheter still remaining in the Bladder for a Day or two longer,
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'till the Ligature dropping off of itself, the Patient had no longer any Occasion of that Instrument. Being thus cured, he now discharges his Urine through an Ivory Pipe, for the whole remaining Part of the Penis was retracted into the Abdomen, so as to make it necessary for him to apply the 'fore-mentioned Instrument to carry out his Urine, and prevent it from wetting his Cloaths.



OBSERVAT. XXXI.

The Gall-bladder, containing distinct Cells, and lined internally with a stony Crust.

THE internal Coat of the Pori biliarii frequently degenerates into a Stony Crust in the Liver of a Cow, for in this Condition we have frequently found it in that Animal, and I have

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sometimes observed the same to happen in the Gall-bladder of that Animal, but very rarely is the like observed in the Human Gall-bladder. Some Years ago I publickly dissected a Human Body, whose Gall-bladder was in a Manner partitioned into many Cells, the internal Coat being in a great Measure petrified, but what Complaints the Patient made from thence while living I could not learn, not being acquainted with any who knew him while living. The Bile in this Gall-bladder was thicker than usual, perhaps from the Remora, or long Stay which it made in these Cells, from whence it could not so readily flow out; much in the same Manner we often see that the Bile is obstructed in the Porus biliaris of the Liver in a Cow, when that Duct is contracted too much in one Part or the other, or stopped up with a stony Matter, or with Worms, which are often found in these Parts. As in this Case the Bile cannot readily flow out, it must acquire a thicker Consistence;

sistence; and what is worthy of Observation, the Bile contained in the Gall-bladder hardly differs from that which we find in the *Porus biliaris*, appearing to me of the same Taste and Consistence; for which Reason, I cannot assent to the Opinion of those who persuade themselves, that these two Kinds of Bile are not the same, but on the other Hand, that they differ very much from each other in Consistence, which is a very wrong Way of thinking, provided the Gall-bladder and *Porus biliaris* are rightly disposed. But if the *Porus biliaris* is obstructed in one Part or the other, by some calculous Concretion, the Bile must consequently be in that Part inspissated; but otherwise in a natural State, the Bile will acquire the same Consistence in the Gall-bladder, as in the *Porus biliaris*: The Gall-bladder may be therefore justly esteemed a Kind of Diverticulum, or Store-house to the Bile, into which it is deposited not only from the Roots of the Gall-bladder (which are

derived by the principal Anatomists from its Bottom, whereas there are very few, if any thence arising; but there are many which come from the cystic Duct,) but also from the Porus biliaris, through which like a large Root the Bile flows not only to the Intestines, but also to the Gall-bladder itself. This Opinion is much favoured, because Horses, Asses, and many other Animals have no Gall-bladder, the Porus biliaris being in them sufficient; add to this, that I have sometimes observed both in Men and in Cows, that the Gall-bladder has been nearly as small in Capacity as the Porus itself.

OBSER.

OBSERVAT. XXXII.

The Menfes suppressed by a Membrane closing up the Passage of the Vagina, and evacuated by making an Incision through the same Membrane.

A Virgin of about twenty Years of Age, being for several Months indisposed, made very frequent Complaints of an intolerable Pain and Weight in her Loins, or about the Hips, whence her Mother thought it advisable to consult and take the Advice of some skilful Person. Mr. *Andrew Boekelman*, a very expert Surgeon, was called, together with myself, in order to find out the Cause of this Complaint; whereupon we concluded from the Pains and Complaints returning every Month, that an Obstruction of the Menfes was the Cause of all the Maladies, as indeed the Event

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proved,

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proved, for she did well only by making an Incision through a certain Membrane which was placed behind the Membrane of the Hymen, entirely stopping up the Passage of the Vagina. It is hardly possible to express how tense that Membrane was, by reason of the stagnant Blood which was there accumulated, distending all the genital Parts outwards, and endeavouring to vent itself without Effect. It is also wonderful, that the Blood which immediately flowed out upon making the Incision, to the Quantity of about four Pounds, rushed forth with great Violence, and not in the least coagulated, nor in the least putrefied, but of a very black Colour, as can be very well attested by the very worthy Physician of the Hospital Dr. *John Danters*, with Mr. *Abel Vanderborst*, an expert Surgeon, who were both present with us at the Operation.

OBSER.

OBSERVAT. XXXIII.

A Placenta Uterina degenerated into Hydatides.

HOW useful is the Knowledge and Experience derived from Anatomy, and the frequent Dissection of Bodies, is in nothing more apparent than in preternatural Births; concerning which many Authors have wrote more sparingly, and with less Exactness than they ought. We come now to speak of that preternatural Birth (on the Mother's Side) in which the Placenta Uterina is retained, and falsely esteemed by some to be a Mola, or false Conception. There are many concurring Causes which hinder the Exclusion of the Placenta after the Foetus; and there are many Kinds of Alteration, or Changes which the Placenta undergoes if it is retained in the Uterus after Delivery. We have sometimes known it to grow to an immense Bulk after being

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retained in the Uterus longer than it ought. Sometimes we have seen it so much compressed and contracted after the Exclusion of the Fœtus, that it has been mistakenly esteemed by others for a Mola, as we observed in a preceding Observation. It is not unfrequent likewise, for the Placenta to be discharged in Pieces at different Times from the Body in a putrid State, and with an intolerable Smell, and sometimes again the retained Parts of the Placenta degenerate into limpid Hydatides like a Bunch of Grapes; and these Kinds of Degeneration of the Placenta into Hydatides. I have frequently seen, and to speak the Truth, I continued a long Time doubtful what to think of them, till I once happened to meet with the Placenta in part sound, and in part degenerated into Hydatides; these Hydatides seem to me to be nothing else than the very minute Glands of the Placenta, distended into watery Vesicles, which is a Disorder frequent enough in the Liver, Kidneys, and other glandular Parts.

That they are dilated Vessels hardly any one can imagine, for then the Hydatides would be found largest about the Middle of the Placenta, whereas we meet with them intermixed large and small together without any Manner of Order ; and besides this, I have observed those Vessels almost annihilated, so as hardly to leave a Branch remaining. What I think concerning the small Glands of the Placenta, contrary to the Opinion of some of the Moderns, I intend hereafter to publish.



OBSERVAT. XXXIV.

*A Tumor in the Loins of a Fœtus with
a Bifid Spine.*

IT is not my Design to refute what other Authors have thought concerning the Bifid Spine ; but I shall only declare what has occurred to my own Observation, having had Opportunities
of

of seeing this Disorder ten several Times. A Tumor frequently arises in the Loins of a Foetus, while it is yet an Inhabitant of the Uterus, which Tumor is in some Measure soft, more especially in its Middle, and frequently it is limpid, as if it was an Hydatid, but sometimes it is found opaque. It is not always the same in Magnitude, being sometimes equal to the Size of a Walnut, and sometimes as large as a middling Turnip. If we rightly examine this Tumor, it will appear as plain as the Noon Sun to be a Dropsy, in part of the Spinal Medulla, and is almost the same Disorder, allowing for the Difference of Situation, with that which in the Head of the Foetus is commonly called an Hydrocephalus. For in the same Manner as in the Head of the Foetus or Infant, before the Bones of the Head are united, by Means of the Sutures, the Membranes of the Brain and Integuments of the Head, are frequently expanded to a great Degree, with a Quantity of Water,

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so as to form a soft Tumor ; in the same Manner also there is a like Tumor, sometimes formed in the Back or Loins, seldom in the Nape of the Neck (as I once saw and preserved the Preparation in my Repository) and still more rarely does it happen in the inferior and exterior Part of the Os Sacrum, as we shall hereafter relate an Instance of this Kind, which came under our Observation. In the Hydrocephalus of new-born Infants, the Brain is in a great Measure resolved into Water, as many are well acquainted ; so also in the present Tumor the Spinal Medulla being wanting, I believe degenerates into a watery Substance ; whereas it is surprising that I should often find the Spinal Medulla well-conditioned below the Tumor ; whence some Children retain the Motion of their lower Limbs, whereas I have found others with their lower Limbs paralytic for want of the Spinal Medulla, which I find is also an Observation made by the justly celebrated Dr. *Schroder* in his curious Observations.

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But never did I observe the Vertebrae so divided in this Disorder as some would have us imagine, that they have totally receded in the Middle from each other into two distinct Parts, in the same Manner as Butchers usually divide the Carcases of Animals which they had slain, into two Halves. The Vertebrae only open or recede from each other in their back Part, near the Spinal Processes, the stronger Part, that is, the Body of the Vertebrae remaining entire in the Manner represented by the annexed Figure. With respect to the Cure of this Disorder, little or nothing can be done towards it, for none of the Infants for which I have been hitherto concerned have escaped, nor did I ever know one of them cured by any Person, yet a palliative Cure may be entered into by astringent and corroborating Remedies, in Form of a Fomentation, which being used twice a Day, an Emplaster is to be applied, which does not too firmly adhere to this tender Tumor, lest it should be opened or rent
by

by the Tenacity of the Plaster ; for we observe that this Tumor being opened accelerates the Death of the Infant, and therefore we must advise with the celebrated *Tulpius*, who in speaking of the same Disorder, says, *Cave sis improvide unquam aperias, quod tam facile occidit hominem*, take Care that you do not ever imprudently open this Tumor, which so easily kills the Patient ; for I do not know that any of those with whom I have been present have ever escaped, when the contained Water of the Tumor has been discharged, either spontaneously, or only by puncturing with a Needle, but all of them almost have expired in a few Days after.

O B S E R-

OBSERVAT. XXXV.

A Disorder of the same Kind with the preceding, seated in the lower Part of the Os Sacrum.

A Disorder much like the preceding, I lately observed, in Company with Dr. Veen and Mr. Andrew Boekelman, Men perfectly skilled in their Profession; but in this Case the Disorder was not seated in the Loins, as we generally find it, but in the lower Part of the Os Sacrum in an Infant, the Tumor appearing partly pellucid, and partly opaque, but very soft, by reason of the ichorous Matter with which it is filled. We here applied nothing more than a Plaster, a drying Foetus, and a Belt, being certain that if the Tumor was opened it would accelerate the Death of the Patient. I have often wondered with myself why this Disorder should not more frequently happen in the fore-mentioned Part of the

the Os Sacrum, as being naturally more disposed to produce this Malady; for the lower Part of the Os Sacrum has always a Cavity in its natural State backward, and is in a Manner divided into two Parts by a Fissure, which naturally is filled only with Fat, covering the lower Part of the spinal Medulla. Among all the Infants that I have seen afflicted with this Disorder, I have not known any survive so long as the present, being now alive, though it is above a Year since I observed the Disorder, which may perhaps be owing to the low Situation thereof.

OBSER-

OBSERVAT. XXXVI.

A fatal Tumor like the preceding Bifid Spine, seated in the Loins of a young Girl.

IN the Disorder mentioned in the preceding Observation, namely in the Spina Bifida, there are not always many of the Vertebrae split open near their spinal Processes; but one Vertebra only affected in that Manner, may be sufficient to produce the Disorder, as I observed in the Daughter of a certain Proctor of *Amsterdam*, who had a Tumor of the Loins equal to the Size of one's Fist, full of Wrinkles, which in a little Time turned to a Gangrene, and though very gently treated with Fomentations proper for that Disorder, yet in the fifteenth Month from her Birth (but generally before that Time) the contained Humour made it's Way through the Integuments, and on the second or third Day after,
the

the unhappy Child expired; whence we took Occasion to examine the Tumor anatomically by the Scalpel, by which we found that only one Vertebra was split or opened, and that with so small an Opening, that it would scarce admit a single Vetch, or small Pea. I could easily pass the Probe upward and downward, into the whole Cavity of the Spina dorſi, whence I was ſtill more confirmed, that this Tumor was nothing more than a preternatural Expansion of the Membranes, which inveſt the Spinal Medulla, diſtended by a great Quantity of a ſerous Humour. Towards the Beginning of the Diſorder, we perceived no Motion in the lower Limbs which fell away, much as if taken with a Palsy; but recovering afterwards their Fat, they were likewiſe reſtored to their Strength and Motion. In opening the Body, every one preſent was ſurpriſed to find Fat contained under the Skin of the Abdomen, to the Thickneſs of a Finger.

O B S E R-

OBSERVAT. XXXVII.

*A Caries of the Ribs from an Aneurysm
of the Aorta.*

AS Sweats breaking through the Pores of the Skin, are in some People so acrimonious, as in a little Time to corrupt their Linnen and Cloaths; in the same Manner also the Humours produce the same Effect, when the true Ribs contract a Caries only from an Aneurysm of the ascending Aorta. About twenty-two Years ago, I dissected the Body of a certain Man, who had for a long Time been troubled with an Aneurysm in his Breast, of such a Magnitude, that it equalled the Head of a new-born Infant, having such a violent Pulsation, that it would strike off the Hand applied to the Breast. After opening the Body, we found an Aneurysm in the ascending Aorta, at about a Finger's Breadth or two distant from the Heart. By the
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Adhesion of this Aneurysm, not only the true Ribs were forced asunder from each other, but we also found them so much corrupted, that a great Part of them was absent, and what remained of them might, by the Pressure of the Fingers, be easily reduced into a Pulp. Upon relating this History some Years ago to the celebrated Physician Dr. *Schagen*, he told me that himself had likewise seen a Caries of the Ribs from an Aneurysm in the Breast. But certainly it is more astonishing than explicable how a close Aneurysm, in which only the Artery is dilated, should in this Manner so powerfully corrupt the Ribs, if I had not lately met with the following History.

O B S E R-

OBSERVAT. XXXVIII.

A monstrous Aneurysm.

 THOSE Authors who define an Aneurysm to be an Artery preternaturally dilated, or extended by reason of a Puncture of some of their Coats, or an Erosion by some acrid Humour, accompanied with a manifest Pulsation, have not given us a sufficient Light into the Nature of this Disorder. For this Definition, or Description of an Aneurysm, holds true only in many of the smaller Kinds; whereas many other Circumstances are to be added to prevent any one from being any longer deceived in the Cure of this Disorder. It is not absolutely in every Aneurysm that a Pulsation is to be felt, even though Authors make that an essential or pathognomonic Sign of the Disorder. If the contained Blood of an Aneurysm is concealed, there will be no sensible Pulsation. This formerly

merly deceived a very expert Surgeon, who when living was my intimate Friend; for having met with a Tumor about the Size of a Walnut near the Ankle, in which he could perceive no Pulsation, he opened the same, not knowing it to be an Aneurysm, as it proved. After opening the Tumor, and pressing out the congealed Blood, there followed such a profuse Hæmorrhage, that it was almost incapable of being suppressed. I have also experienced that there has been no sensible Pulsation, even in some very large Aneurysms. I lately visited a Soldier, who had an Aneurysm spontaneously generated in his Breast, which was of such a monstrous Size, that it might very well equal a middling Size Cushion, upon which we usually sit, supposing the Corners of the Cushion to be off, to make it correspond to the round Aneurysm. Many Days before the Death of this Person, the Aneurysm broke spontaneously in several Places, without any great Loss of Blood; and it was re-

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markable

markable that the Pulsation, which was before very violent, intirely ceased for some Weeks before it burst; and this the Reader will easily believe when I acquaint him, that upon opening this Aneurysm after Death, which arose from the Aorta about three Fingers Breadth above the Heart, I found it composed as it were of a great Number of Lamellæ, or thick, fleshy, and strong Coats lying one within the other, betwixt which Coats lay concealed large Quantities of coagulated Blood. The outermost of these Coats, which was properly the Aorta itself, was about the Thickness of a Straw. It was also further remarkable, that almost all the Ribs of the Thorax, together with the Os Sternum, were so slim and reduced, that they were scarce visible, so that the whole Breast was in a Manner laid bare of this Defence, as we also read in the preceding Observations. From hence followed a Difficulty of Breathing, fainting Fits, and a continual Fever, with which the Patient was molested

molested for many Weeks. The Recollection of this History may perhaps afford some Light in explaining the Caries, or Dissolution of the Ribs, since the Blood confined and stagnating betwixt the Lamellæ, contracting from thence an Acrimony, might by Degrees transude and slowly corrode the Bones. But this Consequence I believe is hardly to be feared in a simple Expansion of an Artery ; from whence we generally suppose an Aneurysm to arise, and in which the Stagnation and Acrimony of the Blood is prevented by its continual Flux and Renovation.

OBSERVAT. XXXIX.

A fatal Scirrhus of the Stomach.

IT is not always in the Power of the Physician to relieve his Patient, as we are daily assured by many Instances, among which a scirrhus Tumor of the Stomach is none of the least. A Man in the Flower of his Age, complained a long Time of a Pain and Uneasiness in his Stomach, and at length he found so great an Increase of his Disorder, that from the Violence of his continual Pain he was scarce any longer able to fetch his Breath; he was also never free from continual Vomitings, and fainting Fits until the last Day of his Death. His Relations gave me an Opportunity of opening the Body, they being very desirous to know what it was that had so long afflicted him in that grievous Manner. The most troublesome Enemy did not long conceal itself, but readily appeared

peared to View upon opening the Abdomen; for the Bottom of the Stomach contained a scirrhus Tumor, almost as large as one's Fist, filled with a black and tough Matter, which Sort of Matter the Patient also vomited a few Hours before Death.



OBSERVAT. XL.

A continual Head-ach removed by the Application of a Seton, but returning again when the Seton was removed, and thus successively for several Times.

THE Daughter of a certain Merchant of *Amsterdam*, about eighteen Years old, of a sanguine Habit, had been for a long Time afflicted with a continual and intolerable Head-ach; to remove which, various Remedies had

been used to no Purpose, by myself, with Mr. *Peter Adrian* the younger, such as cephalic Purges, Alteratives, bleeding in the Foot and other Parts, Blisters, Sternutatories, Cupping, &c. At length also she consented to admit a crucial Incision, which we proposed upon the Fontanel or Bregma, and which was followed with a considerable Hæmorrhage, but without any Ease to the Patient. We had also several Consultations with the celebrated Physician Dr. *Matthew Slade*; and finding no Remedies successful, we at last proposed to trepan the Skull, but before we entered upon this last and severe Operation, I proposed to try a Seton in the Neck, to which the 'fore-mentioned Gentlemen gave their Consent. The Seton had not been long made before the Pains vanished, and what is worthy to be remarked, the Patient being after a while tired with this Kind of Remedy, drew out the Thread, whereupon the Seton healing up, the Disorder immediately returned, insomuch that she

was

was obliged to have Recourse to another Seton, which being made, the Pains immediately again left the Patient; being now more prudent or wise at her own Experience, she suffered this repeated Seton to continue, 'till at length it naturally came out or was expelled of its own Accord. But the Seton being thus a third Time rejected, she had a Return of her Complaint, which obliged us to order the same Operation to be repeated, by which she was again freed from this Complaint, after this she lived free from all Complaint, and still continues so to do.

OBSERVAT. XLI.

A copious Discharge of Lymph in opening a Bubo, suppressed by a peculiar Artifice.

IT is much to be lamented, that many young Surgeons are so idle in their Improvement, and so much taken up with Trifles; among all the Mechanical Arts which are taught, there is none so excellent as Surgery, for the Subject of other Arts is Iron, Wood, Stones, &c. whereas that of Surgery is the Human Body, so artfully framed by the wise Creator, that no one has yet been able to attain a thorough Knowledge of any one Part; and therefore all those who have addicted themselves to the Business of Surgery, ought to be continually exercising themselves, not by playing upon the Flute, Spinnet, or any other musical Instrument, &c. as is now too much in Fashion, but in anatomical Enquiries,
by

by which Means they may be not only able to relieve the Afflicted upon a thousand Occasions, but also to procure the greatest Reputation and Business to themselves. It is also surprising that so many Surgeons should be so stupid, as to think that a rude Notion of the human Body only is sufficient for a Surgeon, and that the more curious Parts of Anatomy ought to be left to Physicians. One of this latter Class lately opened a venereal Bubo before it was arrived to perfect Maturity; and in this indeed he was not culpable, for we frequently do the same; but at the same Time he absurdly divided a lymphatic Vessel. It is wonderful to say what a Quantity of Lymph was discharged from the Wound daily, by which all the Dressings and the Patient's Linnen were continually wetted. At length having no Advice, he applied to me, not knowing from whence so great a Quantity of Lymph was discharged. From hence it is evident that not a superficial or rude Notion of the

human Body is sufficient for a Surgeon, but that he ought to be acquainted also with the more minute Parts ; I therefore judged it necessary to apply linnen Compresses, to be strongly pressed down upon the Part by a Truss, hoping that by this Means the lymphatic Vessels might be compressed, which return the Lymph from the lower Limbs continually upward to these Glands ; and this Method succeeded so well, that the next Day the Patient was quite free from this Complaint ; in the mean Time the Surgeon had an Opportunity of inspecting the Bubo without any Hindrance, or even removing the Truss 'till there was no longer any Danger of a new Flux.

O B S E R.

OBSERVAT. XLII.

*A profuse Hæmorrhage from an Ulcer
in the Penis, suppressed by an easy,
but uncommon Apparatus.*

THE preceding Observation brings to Mind another still more extraordinary, which I shall here add. A certain Surgeon well versed in the Cure of Venereal Disorders, called me up in the Night to a Patient, who had in the same Night lost so much Blood, from a ruptured Artery in an Ulcer of the Penis, betwixt the Glans and Prepuce, that he seemed to be in a Manner exhausted. I may even venture to say, that I found in the Chamber half a Barrel of linnen Cloaths, filled with Blood, as if some Woman had lain in. The Surgeon had applied Styptics before I came, but without any Manner of Relief; there was likewise hardly any Opportunity to make

a Compressure from the natural Make of the Part, whence both the Patient and the Surgeon were drove to the last Extremity; whereas I relieved him from the Danger in an Instant of Time by a very simple Contrivance, namely, I tied the Prepuce over the Glands, and so forcibly compressed the Prepuce with my Fingers, that not so much as a Drop of Blood more was discharged, and thus the Patient was recovered. [*The Instrument called a Yoke serves well for this Purpose.*]



OBSERVAT. XLIII.

The Os Uteri open, and the Pelvis filled with Humours in the dead Body of a Woman lately lain in.

HOW badly Women who have lately lain in in this Country consult their

their own Safety, who do not carefully observe the Time of their Cleansings, but go out of Doors too soon, may appear from the following Observation. In the Year 1679, in the Month of *March* I publickly dissected the Body of a certain Woman for the Use of Midwives, who had lain in for three Weeks and a half, at which Dissection were present the reverend Censors of the College of Physicians. In this Woman the Uterus was extremely large, and the Os tincae extremely open, so far from having contracted to its natural Dimensions, that I could very easily without any Force introduce my two Fingers. Somebody will perhaps say that this is an extraordinary Case, and contrary to the Laws of Nature, but it is sufficient for our Purpose that it does sometimes happen, and how often it may be so no one can tell; and from thence therefore frequently arise those heavy Complaints of intolerable Pains, with Coldness and Obstructions in the Hypogastrium, and not unseldom
also

also a continual Discharge of the Menfes. In the Diffecion of this Body I obferved alfo that the Pelvis was filled with draining Humours, infomuch that it contained near two Pints, not without an intolerable Smell. It may indeed be questioned, whether thofe Humours were difcharged from the Uterus through the Fallopiian Tubes or Oviducts into the Pelvis, which I am very apt to believe, becaufe I have feveral Times found the fame Humours in the Pelvis with thofe contained in the Uterus; but whether they come from the Womb or other Parts, I leave to the Judgment of others; yet I am myfelf of Opinion, that in a very difficult Birth, the Head or Hips of the Infant frequently flop up the Paffage of the Vagina in fuch a Manner, that not fo much as a Drop of the Humours can pafs out; and in this Cafe I cannot fee what fhould hinder the Humours contained in the Uterus from being forced by the violent Throws of the Mother through the Fallopiian Tubes
into

into the Cavity of the Pelvis, and this more especially since there are no Valves found in those Tubes; and from hence malignant Fevers, excruciating Pains of the Hypogastrium, Faintings, with the like Symptoms, and even Death itself may follow.



OBSERVAT. XLIV.

An Amber Bead lying a long Time in the Nostrils, and covered over with a stony Matter.

A Little Girl of five Years old playing with an Amber Bead as large as a Horse-Bean, thrust the same up her Nose out of Sight, from whence followed great Pain, Inflammation, and other bad Symptoms. But no one was able to imagine what should be the Cause of these Maladies; at length when
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the Girl was fourteen Years of Age, by a sudden Fit of Sneezing, she discharged the 'forementioned Piece of Amber from the Cavity of her Nostrils; but hence it is remarkable, that the Bead resembled any Thing rather than Amber, because it was covered over with a Sort of stony Crust, which being forcibly scraped off in one Part, we found the Hole in the Midst of the Bead. How this stony Crust should have grown to the smooth Surface of the Amber is hard to explain. There are indeed various Instances to be found in *Beverovicus*, and other Authors of a stony Bark being formed round various Substances in the Bladder, but for the like to happen in the Cavity of the Nose, I do not remember it to have been ever observed, except that I was lately shewn a Cherry-stone by the 'forementioned Surgeon Mr. *Peter Adrian* the Younger, which had lain a long Time within the Cavity of the Nose, and which was covered over with a stony Bark when it was discharged.

O B S E R-

OBSERVAT. XLV.

Several Things observed in a dropsical Body, particularly the small Glands of the Liver very much tumefied.

THAT the human Liver is in a great Measure composed of small glandular Bodies, we discovered long ago, namely, in the Year 1686, I opened the Body of an old Woman dying of an Ascites, for the Instruction of my Pupils. I first made a Passage with the Point of my Knife, for the Discharge of a thin Serum contained in the Abdomen; but after enlarging the Incision, a very thick, viscid, and yellow Humour offered itself to View, sufficiently declaring that a Paracontesis cannot always be of the supposed Use in an Ascites, and that it ought not to be so precipitately applied to as some Authors have advised; for few are by this Means relieved, unless the Ichor is contained betwixt the Muscles
and

and Peritonæum, or as others say, betwixt the Duplicature and Peritonæum. Upon pressing the Fallopian Tubes, they discharged a Matter resembling Semen Masculinum. The Ovaria were very fat or depressed, as in old Women they generally appear. The Intestines adhered not only to each other, but likewise on all Sides to the Peritonæum. The Surface of the Liver was unequal, being tumified with glandular Bodies. These glandular Bodies of the Liver, or small Glands of the Liver being increased in Magnitude, I have several Times observed, and lately demonstrated in Public, but never found them so numerous as in the Liver of the 'fore-mentioned old Woman: the whole Liver seemed to be made up of nothing but Glands, which rendered the Surface of that Viscus very unequal.

O B S E R.

OBSERVAT. XLVI.

An Ascites, or Dropsy of the Abdomen, contained in Hydatides, or little Bladders.

IT is not without Reason said, that the Physician has it not within his Power to relieve the Patient of every Disorder, since we frequently meet with many which are quite incurable. For who can cure an Ascites, when the Water is included in tough Membranes, of which we have seen many Instances, and of which there are likewise many Instances given by Authors; but I do not remember to have ever met with a more surprising Case of this Nature, than that which happened some Years ago, in Company with Mr. *Peter Adrian* the Younger, when upon opening the Body of a certain Maid, who died advanced in Years, we found the whole Cavity of the Abdomen, which was very much distended, to be filled with an infinite
Number

Number of Bladders, or membranous Sacculi, containing a thick glutinous Humour. Some of these Bladders were about the Magnitude of a small Fist, others were no larger than Walnuts, and not a few of them were about the Size of Filberts. But whether or no these Vesicles in this Subject were small Glands of the Mesentery dilated, or degenerated into Hydatides, or whether they were lymphatic Vessels preternaturally expanded, I cannot certainly affirm, because my Time being short, and interrupted by the Presence of the Patient's Relations, prevented me from making further Enquiry.

O B S E R.

OBSERVAT. XLVII.

A Fissure of the Cranium from a Contusion passing through the Sutures.

WITH what little Reason some Anatomists assigned the Use of this Uterus in the Skull, to be for preventing Fissures from passing from one Bone to the other, those are well acquainted who have observed the contrary with ourselves. In the Year 1670, a wooden Mallet used to drive Stakes into the Ground, fell upon the Head of a certain Man, who immediately fell to the Ground, destitute of all external and internal Sense, and the Blood running through his Ears he soon after expired. The Body was brought to me to examine the Cause of this Accident; after laying the Skull bare, the left parietal Bone appeared slit throughout from above downward; but the Fissure did not there terminate, continuing its Course through
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the Squamose Suture and the whole Os Petrosum, even to the Foramen Magnum of the Os Occipitis, the Sutures availing nothing towards stopping the Course of the Fissure.



O B S E R V A T. XLVIII.

A fungous Excrescence, with a Caries of the Palate happily extirpated and cured by the Knife and Cautey.

MANY and desperate Diseases would be oftner cured, if the Patient confided more in the Surgeon, and was less fearful in himself. A Counsellor of great Merit, then living at *Amsterdam*, came to me some Years ago, telling me that he found some Uneasiness in the posterior and lateral Part of his Palate; which after I had seen and well examined, I acquainted him that it was a Disorder which

which ought not to be slighted, nor yet to be talked of, for I was afraid of his falling into the Hands of those who would have prescribed all Kinds of Remedies to no Purpose, or rather to the Increase of the present Malady. Having heard this, the honourable Patient asked me what the Nature of the Disorder was, and with what Remedies I would propose to remove it; to which I answered, that the Disorder consisted in a Caries of the posterior and lateral Part of the Palate Bone, accompanied with a fleshy fungous Excrescence, which last must be extirpated, and the Bone cauterized, in order to a Cure. The Patient did not long defer the Means proposed, but soon sent for *Cyprianus*, and Mr. *Peter Adrian* the Younger, two very expert Surgeons, who likewise recommended the Method which I had before proposed. Having therefore provided some Cauteries adapted to the Part, with other Things, which were in general previously necessary, we likewise extracted some of the grinding Teeth,

Teeth, which stood in the Way of our Operation, which we afterwards performed as follows. Every Thing being prepared and duly disposed, we admonished the Patient to hold up his Finger, when the Cauterization had been continued so long that he could not bear it for Want of Breath, that he might not be in Danger of Suffocation; for we knew by Experience, that almost as great a Smoke or Fume would be raised, as is usual in repairing the Hoof of a Horse. This being premised, we introduced a Bit of Wood about the Thickness of a Finger betwixt each Jaw to keep them open in the Operation. After this, one of the Surgeons extirpated the whole Tumor with a short and crooked Scalpel, adapted to the Figure of the Palate, and in the mean time the other Surgeon secured the internal Part of the Cheek with a very broad Spatula, to prevent them from being injured by the Cauteries, for which Purpose also some Compresses of scraped Lint, dipped in cold Water,

Water, were applied towards the Cheeks: Having extirpated the Tumor, the Cauteries were applied red hot successively one after the other, 'till we judged them to have performed their Office ; observing in the mean Time to remove the ignited Cautery when the Patient lifted up his Finger to fetch his Breath. This being performed, we put the Patient to Bed, who in the mean Time talked to us very sociably and chearfully ; and to allay the Inflammation, and mitigate the Pain, we prescribed a Mouth-wash, and a Drink of Barley. By the next Day we found the Patient so much altered, that we did not know him, his Head was so much swelled, by reason of the great Inflammation, from whence he had also a Fever ; but by the Use of Anti-phlogistic Remedies, both the Fever and Inflammation were quickly removed ; and in the mean Time we made Use of a Decoction of Mallows, Figs, &c. to promote the falling off of the Eschars, adding a sufficient Quantity of Mel Rosarum,

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sarum, and changing the Decoction as we found it necessary. After the Separation of the Eschars, all the Parts appearing red, the Patient seemed to be in a fair Way for Recovery ; but soon after, a small Piece of fungous Flesh exhibited itself to View, which made us suspect that the Disorder was not totally eradicated. We therefore proposed a new Cauterization, which the Patient did not at all oppose, bidding us do what Art required. The next Day we performed a second Cauterization, and almost with the same Event with the first ; for the Patient's Head was again violently swelled, being accompanied with a Fever, which we removed by the same Means ; and in a little Time after, the Patient was perfectly cured, having since lived in Health for several Years.

O B S E R.

OBSERVAT. XLIX.

*A like Caries and Sarcoma of the
Palate, but not happily cured through
the Ignorance of the Surgeons.*

ABout the same Time a certain Merchant applied for a Cure for a like fungous Excrecence and Caries of the Palate, to some rash Practitioners, by whose improper Treatment, the Disorder was so much increased, that it was at length rendered almost incurable. At length being tired out with the trifling Remedies of those ignorant Pretenders, the Patient applied himself to me and others; but being informed that we could hope to do him no Service without Cauterization, he renounced our Assistance, because, says he, there are some who promise me a Cure only from the Application of Medicines to the affected Part, which they keep as a Secret not to be revealed to any one. Some Time
G 2 after,

after, the Patient's Relations consulted me again, saying, that the Patient was willing to undergo the Cauterization; but a Surgeon who was present to cauterize the affected Part, brought for that Purpose such a small Cautery, as is commonly used for a carious Tooth, and being asked what he was about to do, he answered, to cauterize the Caries of the Palate; but when we informed him what Cauteries would be necessary to perform this Work, the Patient almost fainted away, and so continued for several Weeks without the Assistance of the proper Remedies, 'till at length the Disorder became fatal.

O B S E R-

OBSERVAT. L.

*A Scirrhus and Abscess of the Liver
happily cured.*

WHAT lamentable Disorders may be seated in so noble a Part as the Liver, we are taught by many practical Observations; and the Instance here produced is in some Measure extraordinary, though not altogether unobserved before. A Youth who was learning the Profession of Surgery, had complained to us for three Years past of a heavy Pain and Tension in the Opi-gastrum, extending from thence towards the left Hypochondrium; at length there was a hard Tumor here formed, attended with some Difficulty in the Respiration, and a slight Fever. Having examined into the Symptoms, I judged that there was a Scirrhus, or Induration of the Liver, and by the Application of various emollient Plasters and Cataplasms,

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the Tumor was softened, and brought to Suppuration, after which a potential Cautery being applied, the Abscess was opened with a Lancet, from whence a great Quantity of Matter was discharged, and soon after the Ulcer was cleansed and healed. In this Case there is no room to doubt, but that the gibbous Part of the Liver adhered to the Peritonæum by some previous Inflammation, so that when the Ulcer was opened, the Matter was denied a Passage into the Cavity of the Abdomen. Some Instances of the like Kind are also to be found in the curious Observations of *Marchetti*, Professor at *Paduway*.

O B S E R-

OBSERVAT. LI.

That the Spleen, Liver, and renal Glands may be very well esteemed sanguineous Glandules.

THAT the Spleen justly deserves the Title of a Gland is evident, if we compare the glandular Substance, which we often find in the Spleen, with the thyroide Glands, in which after strict Examination, we shall observe but little Difference. 'Tis true, the Spleen differs much from the Pancreas and salival Glands, and yet it may be justly esteemed a Gland; at least it may be esteemed a sanguineous Gland, subservient to the Blood, with which it agrees in Colour. Of this Nature, that is, among the sanguineous Glandules, may be reckoned the renal Glands and the Liver, together with some which usually adhere to the Spleen. In these Glands no peculiar excretory Duct could ever yet be found

besides the Veins ; nor do they seem to be of any other Use, than like the conglobate Glands of the same Nature, which serve to return Lymph to the Heart ; in which besides the lymphatic Vessels, there is no particular excretory Duct to be found. It is not to be doubted, but that they serve to exalt and render the Lymph more perfect, or else that they prepare a peculiar Juice from the arterial Blood, which they return into the Lymph. The same Opinion is to be also formed concerning the sanguineous Glandules, which serve to exalt and render the Blood itself more perfect ; and hence it is that we find the Blood more thick and melancholy, when the Spleen is obstructed, tumefied, indurated, or otherwise disordered. The Spleen, I think, is therefore to be esteemed a sort of Gland, which is also the Opinion of the celebrated Anatomist *Malpighi* ; which Opinion is also the more probable, inasmuch as I frequently found small Glands
near

near the Spleen, in all Respects like unto that Viscus. I remember to have demonstrated these Glands of the Spleen, or seated near the Spleen, in the Body of a certain Woman, of about forty Years old, who died of a Jaundice and Bilious Diarrhæa in the Hospital of *Amsterdam*, in which the President and Governors gave me Permission to open many Bodies. In this Body I demonstrated two Glands growing to, and very much resembling the Spleen itself, except in Magnitude, besides a Scirrhus in the Spleen itself as large as a Walnut; at which Time was present *Dortmunde, Dankers, Roonbuijs, Coenerding, &c.* Persons celebrated in the Profession of Physic and Surgery: For these two Glands resembled the Spleen, not only in their external livid Colour, but also in their internal dark red; their Substance being perfectly the same with that of the Spleen. It is also remarkable, that the small Vessels of these Glands arising from the splenetic Vessels, were distended by inflating the Vessels of the

Spleen itself; whence we think that these Glands may be justly esteemed subsidiary Spleens, more especially since they are so much increased when the Spleen is indurated, that they equal the Magnitude of a Walnut, as I have formerly observed.



OBSERVAT. LII.

Tumors depending from the Occiput in the Heads of Infants, larger than the Head itself.

I Have sometimes observed Tumors depending from the Head in new-born Infants, and which have been more than equal in Magnitude to the Head itself. I remember once to have seen such a Tumor even larger than the whole Infant, by which the Birth was rendered extremely difficult; but as the whole
Tumor

Tumor was replete with nothing but Humours, it could not absolutely prevent the Birth. Although these Tumors are improperly called a Dropsy of the Head, so long as the Head is in this Case well constituted, yet the Disorder has often so much Affinity with the Hydrocephalus, that the Fœtus soon expires upon opening one of the fore-mentioned Tumors, in the same Manner as we have observed upon opening the Hydrocephalus; for the Humours contained in these Tumors generally communicate with the watery Juice supplied to the Ventricles of the Brain. I have sometimes found these Tumors not altogether humoral, but in part fleshy, and even in part cartilaginous.

OBSERVAT. LIH.

The Cure of a Wound penetrating into the Thorax, with a Portion of the Lungs coming out through the Wound.

NOT only the Liver, but also the Lungs, may suffer very great Injuries, without destroying Life, provided they are artfully treated. The Servant of a certain Sea-faring Person, being wounded in the Bottom of the fore-part of the Thorax into its Cavity, a Surgeon was called, who seeing a Portion of the Lungs thrust out of the Wound, immediately made a strong Ligature about the whole Part that was expelled, thinking it to be a Portion of the Omentum, and immediately sent for me into Consultation; but upon hearing me say that the Wound was not inflicted in the Abdomen, but into the Cavity of the Thorax, and that the Part thrust out which
he

He had tied with the Ligature, was a Portion of the Lungs, he stood like one astonished. But Things being thus stated, I advised him to leave the Wound as it was, and to dress it once a Day with a defensive digestive Emplaster, 'till he found a Part of the Lungs intercepted by the Ligature mortified, hoping that it would be then separated, and the Remainder of the Lungs healed in the Wound itself, which so happily succeeded, that the Patient was cured in a little Time after.

OBSER-

OBSERVAT. LIV.

A mortal Wound in the Orbit of the Eye.

A Certain Man some Years ago was wounded with the End of a Stick which was not very sharp, entering the left Orbit of his Eye, which Wound was slighted, and judged to be of no Consequence by those who had the Cure of it, yet the Patient expired soon after he had received the Wound. The Mayor and Sheriffs of this City gave Orders to myself and the Surgeon in ordinary, to open the dead Body, in order to discover the Cause of the sudden Death. Externally we found a small Ecchymosis in the upper Part of the Eye, but after taking off the Top of the Cranium by the Saw, we discovered the Snake in the Grass, for the Wound had penetrated the Brain to a considerable Depth; and this Accident might very easily happen in this
Part

Part of the Orbit, by reason of the exceeding Thinness of the Bone above; for in many People the Bone is here no thicker than writing Paper; and in the recent Body it is so soft, that in many Skulls I have perforated it only with pressing it by my Finger. Hence therefore it is evident, that Wounds inflicted in the Orbits of the Eyes, ought not to be slighted or esteemed of little Consequence, especially if the wounding Instrument is not very obtuse, or if the wounded Patient becomes sleepy, inclined to vomiting, is feverish, or troubled with Vertigo's and Convulsions.

OBSER-

OBSERVAT. LV.

*A Needle swallowed, and making it's
Way through an Abscess in the
Groin.*

IT is not without Reason said in the Proverb, that Nature is the Preserver of herself; for the Truth of this Maxim appeared as evident as the noon Sun, in the little Daughter of a certain Lord, who, unknown to her Parents, swallowed a Needle. Sometime after, a hard and inflammatory Tumor being formed in the Groin, accompanied with Pain and Fever, the Parents sent for me, who being informed that the Tumor did not arise suddenly, but enlarge by degrees, the Patient being neither troubled with a Vomiting, nor a Constipation of her Bowels, I judged the Tumor to be a Bubo, namely, a Tumor and Inflammation of the inguinal Glands; and since the Pains were so violent, I judged
nothing

nothing would be more convenient than the Application of emollient Cataplasms. These Remedies being applied by another Surgeon, the Tumor seemed to us to incline to Suppuration, and therefore we endeavoured to bring it speedily to Maturity by the Addition of maturing Substances, and at length opened the Tumor with the Point of a Lancet; but to our Surprise, a rusty Needle was discharged, together with a considerable Quantity of Matter, mixed with some of the intestinal Fæces. Having observed this, the Case seemed unrelievable to Art, but not so to Nature, who frequently works her own Preservation in a surprising Manner; and therefore we treated the Abscess with mundifying and incarnative Medicines, 'till it was at length perfectly consolidated. In this Case there is no Doubt but in the Beginning the Intestine firmly adhered to the Peritonæum, being injured and inflamed by the Point of the Needle, in the same Manner as we observe the Intestines

testines to adhere daily in other Inflammations; and from thence it was that we had a free Discharge of the intestinal Fæces, which were thus prevented from falling into the Cavity of the Abdomen.



OBSERVAT. LVI.

A serous, or phlegmatic Asthma, with a remarkable Stone in the Kidney.

AMong all the Bodies which I have hitherto dissected, I do not remember to have ever met with such large Stones as those which I cut out in the Year 1684, from the Body of a Woman about forty Years old, dying of an Asthma in the Hospital of *Amsterdam*, at which Dissection were present *B. Dortmunde*, and *John Verwot*, Censors of the College of Physicians, *R. Rhombuse*, and *A. Conerding*, experienced Surgeons

geons of the said Hospital; and in this Subject there was so great a Quantity of frothy Water contained in the membranous Cells and Bronchia of the Lungs, that upon cutting off a small Part, it ran out Drop after Drop. In the Abdomen the Stomach and Intestines were in their natural State, and seated in the Hypogastrium. The Uterus was not in the Middle of the Pelvis, but inclined to the left Side, being in other Respects in its natural State. The Pelvis of the Kidney, as also the left Kidney itself, contained a prodigious large Stone, resembling both in Magnitude and Form, a large Race of Ginger, of two or three Fingers Breadth, and as much in Length.

OBSER-

OBSERVAT. LVII.

*A Stone of an unusual Magnitude in
a Girl three Years old.*

A Girl of about three Years old discharged fifty Stones, many of which were about the Size of small Peas, according to the Account of the celebrated Physician of *Amsterdam*, Dr. *Bronckhorst*, who attended her while living. It is easy to conjecture what Torments afflicted the unfortunate Patient, from which she was not free 'till Death. After opening the Body, I found the Pelvis of the left Kidney very much dilated, and filled with a Stone of a great Magnitude, considering the tender Age of the Patient.

● B S E R.

OBSERVAT. LVIII.

*Concerning the Origin and Nature
of Molæ.*

A Mola is said to be a shapeless Mass of Flesh, destitute of Bones, and generated from a false or imperfect Conception. But if this be true, it may seem wonderful, that such sort of Molæ should be discharged from Maids, or Virgins, or at least from such as have not lain under the least Suspicion. I have also observed old Women, who have made no Use at all of Men, to avoid such Masses or Molæ as these before-mentioned. It frequently happens in Abortions after the Fœtus is excluded, that the Placenta remains behind, not only for Weeks, but even for Months, and by the Pressure or Contraction of the Uterus, is not only formed agreeable to the Cavity of that Viscus, but is also frequently so much indurated, that in
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the Compactness of its Substance, it much exceeds Flesh, and may be taken for a Mola. For above these twenty Years past, it has been enacted by the Sheriffs and Aldermen of this City, that to prevent further Misfortunes in Midwifry, of which there are many great Complaints, that the College of Physicians and myself, should examine all the Midwives admitted to practise within the City of *Amsterdam*, the Number of which was very great: I have asked almost every one of them what they have observed concerning Molæ, but none of them could give us any Account, farther than that they were firm fleshy Bodies, which they had known to be excluded from the Uterus, but never living, as some imagined. Sometimes Sarcomata, or fleshy Excrescencies, are expelled from the Uterus, which are mistaken for Molæ, for thus I call them, because I never could find any Thing in them but Flesh; and such Excrescencies as these I have observed adhering to the Uterus
itself

itself by a Foot-stalk, when Women have been in Labour. But at these we need not be at all surpris'd, since such like Bodies grow out even from the Stomach and Bladder, according to my own Observation. It is therefore highly probable that the Molæ so often talk'd of above and observed, are nothing more than fleshy Excrescencies of the Uterus like those before-mentioned, or else Placentæ retained in the Uterus, and there compressed, as I have observed before; but not at all do they arise from a bad Conception.

OBSER-

OBSERVAT. LIX.

*A Gangrene and Perforation of the
Vagina and Rectum happily cured.*

EVEN in the most dangerous Cases the Physician ought not to despair, since frequently by the Assistance of Nature, almost incredible Cures are brought about. There are some People very forward in their Talk, as they are backward in their Performance, and who are hasty enough to pronounce, that the Patient will not be cured, that he cannot escape, but must die, &c. Whereas if they consulted their Reputation, they would certainly be more cautious in their Prognostics. The Wife of a certain Baker in *Amsterdam* was afflicted with such a dangerous Gangrene of the Vulva and Intestinum Rectum, brought on by a difficult Labour, that many believed she must in a little Time be lost. After the Separation of the Gangrene, we observed

served so large a Perforation through the Vagina, that one might easily pass a Walnut, covered with its green Shell, through the Opening into the Cavity of the Intestinum Rectum; hence the intestinal Fæces had a ready Passage from the Rectum to the Vulva, which is indeed not unfrequent in such Disorders, since the Vagina adheres so strictly to the Rectum, that they seem to be as it were one continued Body, so that if either Part is affected, the other cannot remain free. The Surgeon, who with myself, undertook the Cure, contrived an Instrument formed of a metalline Plate, in the Shape of a hollow Pessary, the external Surface of which was spread with sarcotic Medicines; but as this was not consistent with the Theory of Surgery, so it was also found useless in the Practice, it being intolerable to the Patient. We therefore applied the forementioned Medicines, spread upon Pledgets, to the Opening of the affected Parts, by which Means the Patient was cured in

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a little Time. Where then are those shallow-headed Surgeons that cry out that such Disorders are incurable, and can never be cured without leaving a Fistula behind? I can assure them, that not only this Woman was perfectly cured, without any Defect remaining, but also that we have cured many others disordered in the same Manner. But I observed this Difference in Gangrenes of these Parts, that if the back Part of the Vagina, namely, that towards the Os Sacrum, is thus affected, it may be more easily cured, on Account of the Fleishiness of the Intestinum Rectum, and Disposition of the Vagina, which towards the Rectum has not so many transverse and hard Rugæ, nor so many Nerves to retard the Cure, which there succeeds the more readily, as all the Parts are more soft. But in the anterior Part of the Vagina, namely, that towards the Meatus Urinarius, the Cure is not only more difficult for the 'forementioned Reasons, but also because the continual
Draining

Draining of the Urine retards the Cure,
and frequently leaves an incurable Fistula.

OBSERVAT. LX.

*A Contusion of the Head happily cured,
only by a Fomentation, without Tre-
panning, which was recommended
by an unskilful Hand.*

IF the Saying of *Hippocrates* be true,
namely, that Experience is fallacious,
it may be certainly pronounced with
more Truth, that Practice without Ex-
perience must be extremely fallacious.
A certain Woman fell out of a Chaise
upon the Earth, which was frozen hard,
whence her Forehead was so violently
contused, that a large Tumor imme-
diately appeared. A Surgeon living in
the Suburbs having examined the Tu-
mor, and understanding the Patient had

H 2 vomited

vomited several Times, judged that the Skull was split and depressed, so that the Patient could not be cured without a crucial Incision through the Integuments, and an Elevation of the Bones. At his proposing this, the By-standers ordered me to be sent for, but I soon opposed his intended Operation, and asserted, that there were no Signs of a Fissure of the Cranium. To this he audaciously answered, that he could perceive the Depression of the Skull with his Fingers, and that there could never be any Depression without a Fissure; and indeed, if I had not frequently examined such Tumors of the Head with my Fingers, and made myself better acquainted with their true Nature by Experience, I should myself also have pronounced, that the Cranium was depressed; for thus indeed Tumors of the Head, arising from a violent Contusion, often seem in their Examination by the Touch. For when the Part betwixt the Tumor and sound Part of the Head is
com-

compressed by the Finger, the Cranium seems to be depressed; and thus the younger Surgeons may be easily imposed upon, who therefore ought to be cautious that they do not fall into the like Error. I therefore ordered the Application of a cephalic Fomentation to the Part which was intended for the crucial Incision; the Form of which Fomentation may be seen below; and by this Means the Tumor dispersed in two or three Days Time, and the Patient recovered without any greater external Remedy. But I judge that the Trepan and Scalpel ought not to be immediately applied, even in a true Fracture of the Cranium, as well as in these violent Contusions, in which the Symptoms are not very urgent; for in that Case, after Bleeding, it is better to apply some such cephalic Fomentation, not used sparingly, nor in thin Rags, but in thick Flannels, applied very warm, and all over the Head; for by this Means I have happily relieved those

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whose Heads have been almost under the Incision of the Scalpel.

The Form of the cephalic Fomentation before-mentioned.

R Herb. Betonicæ,
Majoranæ an. m. ij.
Rutæ an. m. j. ß.
Flor. Stæchados,
Lavendulæ an. m. f.
Rosarum rub. m. j.
Coq. f. a. ex f. q. vini alb. ad ℥ij.
Colatura detur usui.

OBSERVAT. LXI.

An Inflammation of the Uterus after Birth, frequently arising from the rough Treatment of the Midwife.

AMong all the Disorders to which the Uterus is liable, an Induration and Inflammation of it at the Time of lying-

lying-in is one of the most frequent and remarkable ; by which only many Women are destroyed in their lying-in. I have often wondered with myself to observe, how easily the Uterus is inflamed in some Women to what it is in others. I have even observed the Uterus inflamed after Delivery, when the Birth has been easy. Midwives ought therefore to know that the Uterus should not by any Means be strongly pressed upon externally, in order to turn the Infant's Head towards the Os Uteri ; they should learn to be cautious in their extracting of the Secundines, to avoid compressing the Abdomen, and consequently the Uterus in too violent a Manner. Midwives ought to be more cautious not to introduce their Hand into the Uterus, without absolute Necessity, because by the Pressure and Attrition of the Hand, I have frequently known the lower Part of the Uterus to be inflamed. But what shall we say to those rash and daring Practitioners, who make no Scruple to in-

roduce their Fingers into the Anus to make Way for the Exclusion of the Head of the Foetus, by which Practice the Intestinum Rectum and adjacent Parts may be easily inflamed. In short, not the least Violence of any Kind should be offered to the Womb, to avoid these Inflammations, and other bad Consequences which too frequently follow from that Cause.



OBSERVAT. LXII.

*The Spleen prolapsed into the Pelvis,
it's natural Place being filled with
another Body like unto the Spleen.*

AMong those Parts of the human Body which sometimes change their natural Situation, the Spleen is none of the least remarkable, which in it's natural Situation under the false Ribs cannot be felt by the Fingers. But in

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a preternatural State when it is much enlarged in Magnitude by its Weight and Bulk, it sometimes descends not only below the false Ribs, but even into the hypogastric Region, so that it may be plainly felt by the Hand. In the Year 1670, a certain Woman in our Hospital contracted a Hardness and violent Pain in the hypogastric Region, after a painful and difficult Labour. Some People suspected that this Hardness arose from a Retention of the Placenta Uterina, and therefore various Remedies were used in order to expel the same; but all being to no Purpose, the Patient at length expired. The Physician in ordinary at that Time to the Hospital, Dr. Gerard De Penin, gave me an Opportunity of opening the Body. I found all the internal Parts duly disposed, except the Spleen, which was above eight Times larger than its natural Bulk, weighing four Pounds, and being prolapsed into the Cavity of the Pelvis; but in the natural Seat of the Spleen appeared another

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Body of the same Fabric, about the Size of a large Chesnut, but in Colour and Substance exactly resembling the Spleen. The same History is related in *Schraderi Observat. Anat. Med. Decad. 3. Obs. 4.*



OBSERVAT. LXIII.

An oblong Tumor of the Abdomen after Child-birth, from a Contusion of the Omentum.

I Was for a long Time doubtful concerning the Nature of those hard and oblong Tumors with which Women are frequently troubled in the Abdomen after Delivery, until I had an Opportunity of gaining more Light into this Matter by the Dissection of a certain Body, in which I observed the Omentum almost two Fingers thick, three Fingers broad, and a Span and a half long

long degenerated into a Substance betwixt Fat and Flesh, and in some Measure scirrhus. I have frequently handled Tumors of this Nature, while yet contained in the Abdomen of living Women, after they have been delivered, some of which I have observed in a transverse Position, and others in an oblique Posture. I am apt to believe, that in this Case the Omentum having been compressed by the circumjacent Viscera during the Time of Gestation, that by the Pressure and Attrition which it receives from the Uterus, it may be sometimes inflamed, enlarged and concreted together with the Uterus, in the same Manner as we observe in many other membranous Parts of the Body, after they have been inflamed, even to a slight Degree. It is remarkable, that these oblong Tumors can be frequently handled by the Women themselves, in whose Abdomen it is contained, seeming to them as if a Gut was in the Hand. I have several Times observed Women

sustain these Tumors for many Years, often with little or no Pain, but not without some Inconveniency. In the Woman which I opened, as above-mentioned, the whole Omentum, from the Bottom of the Stomach to the Uterus, was rolled up and concreted together like an Intestine, being very much indurated, and firmly attached to the Bottom of the Uterus, near which, upon making a transverse Incision through the Omentum, I could plainly perceive the Folds in which it was rolled up and concreted together.

OBSER.

OBSERVAT. LXIV.

*Worms found concealed in several of
the Viscera.*

Whether all Animals and Insects are generated Ex Ovo, as *Harvey* and his Followers teach, I am apt to doubt, because there are Worms found in the Arteries of living Horses, as also in the Parenchymous, or glandular Substance of the Liver, and even in the cystic Duct and Pori Biliarii in Sheep, as also in the Gall-bladder itself, as I have frequently observed. I once remember myself to have seen them in the Kidneys of a human Body, of the same Sort of those which are more frequently to be met with in the Kidneys of Dogs. And that there have been Worms found also in the Brain, no body can be ignorant who has turned over Authors of the best Repute. But by what Ways these Animalcules of their Eggs should
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be conveyed into the inmost Recesses of the Body, cannot be readily determined; for it does not seem probable that they should have been conveyed to the fore-mentioned Parts through the Pores of the Skin, or through the Organs of Respiration; and much less probable is it that the same Ova should be conveyed through the Mouth, Intestines, Lacteal and other Vessels; even it is not easy to conceive how they should remain entire in the Stomach, by the Action of which in Chylification, there is a considerable Fermentation and Dissolution of every Thing which it contains. The chyli-ferous, or lacteal Vessels, are likewise so small at their Origin, that they cannot by any Means afford a Passage for such Ova to pass through; to which add, that no one ever saw Worms of the same Kind out of the Body. We ought therefore to remain doubtful in this Respect, until we receive a true and infallible Light from the Ingenuity of those who demonstrate every Thing mathematically,

matically, and from their Causes, as far as God will permit.



OBSERVAT. LXV.

A great Part of the Liver degenerated into Hydatides, after being wounded by an unskilful Surgeon.

THAT the Substance of the Liver is glandular, or composed of very small Glands, I have already endeavoured to prove by various Observations; and I have several Times demonstrated these Glands to be degenerated into Hydatides; but my Design in this Place is to relate a very surprising History of the Liver, in a great Part degenerated into Hydatides. A certain rash Surgeon dwelling in a certain Part of the Suburbs of this City, being about to perform the Paracentesis of the Thorax for a Dropsy,

Dropſy, which he imagined to be in the Breſt, ſent for me into Conſultation, but being ſo much indiſpoſed that I was not able to come, he by himſelf, and of his own Accord, perforates not the Thorax, but the Abdomen in the right Hypochondrium. Hereupon many Hydatides burſt forth ſucceſſively, at the Sight of which, being aſtoniſhed, he inſerted a Tent, and came running to me, but to no Purpoſe, for ſoon after the poor Woman expired, whence we had an Opportunity of enquiring fully into the Diſorder. Having opened the Thorax, we found no preternatural or extravafated Humour, but all the Viſcera there appeared well-conditioned. But in the Abdomen, the Liver adhered to the Peritonæum, and its proper Subſtance ſeemed in a great Meaſure to be made up of Hydatides. This Part of the Liver adhering to the Peritonæum, had been wounded by the ignorant Surgeon, who attempted to perforate the Thorax, and from that Wound Hydatides burſt forth,

forth, which might more easily happen, because the whole Substance of the Liver in that Place was degenerated into Hydatides, in such a Manner, that only the Membrane investing the Liver, interposed betwixt the Cavity of the Abdomen and Peritonæum, to which last the Membrane of the Liver adhered.



OBSERVAT. LXVI.

The Spleen cut out in a living Dog, who survived, notwithstanding the profuse Hæmorrhage.

Wounds penetrating the Abdomen with a small Extravasation of Blood into it's Cavity, but without injuring any of the more noble Viscera, are in my Opinion not so dangerous as some imagine. An Instance of this we have in a Dog of a moderate Size, whose Spleen,

Spleen, for the Satisfaction of my Pupils, I lately cut out, after having first tied up the splenic Vessels, neglecting at the same Time the small epiploic Artery. Having thus extirpated the Spleen with its Vessels, the 'forementioned epiploic Artery which was not tied, bled so profusely, that the Dog seemed to be about to expire ; but yet I returned the same Artery without a Ligature into the Abdomen, where it doubtless continued to bleed for some Time. I then united the Wound by the uninterrupted Suture, and in a little Time, within six or seven Days, the Wound was healed up, and the Dog appeared well. For the first two or three Days after the Operation the Dog would neither eat nor drink, frequently vomiting ; but afterwards the Dog eat very greedily, and so continues to do.

Therefore Wounds of the Abdomen penetrating its Cavity with a moderate Extravasation of Blood, and without any great Injury of the more noble Viscera,
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are not to be pronounced in themselves mortal, even though there is no Opportunity in this Case to discharge the extravasated Blood by Paracentesis. We need not be very solicitous in our Enquiry after the Time when, and the Passages by which the 'forementioned Blood was carried off by Nature; but it is sufficient that we have often experienced such-like Extravasations of Blood dispersed without any ill Consequence. Besides those well known Passages of the Intestines, Pores, Kidneys, &c. I must believe that there are other Passages, and that the lymphatic and Blood-vessels themselves have also a Share in receiving the extravasated Blood. For the Blood which has been thus extravasated and confined in the Cavity of the Abdomen, must either congeal or remain fluid. If it concretes, as we observe after Bleeding, in a Bason, there is no Doubt that the greatest Part of it, if not all, will in Time dissolve into a serous Liquor, as we see in the Blood which has been
drawn

drawn from a Vein; and thus it will be put into a Condition to be received into or taken up by the Vessels. But if the extravasated Blood does not congeal, there is still the same Reason for it to be absorbed by the Vessels, especially the Veins, provided its Quantity is moderate, and the Air excluded. But if a large Quantity of Blood is retained in the Cavity of the Abdomen, which has been perforated by a large Wound, and not secured from the external Air, that Blood will then corrupt, excite Fevers, and put the Patient in great Danger of his Life.

OBSER-

OBSERVAT. LXVII.

*The Spina Dorsi incurvated in Form
of a Circle.*

AMong the Disorders of the Bones,
I do not remember to have seen
any more surprizing than the Contraction
of the Bodies of the Vertebrae in their
Fore-part, almost into nothing, being
compacted or pressed into each other to
such a Degree, that they were scarce
equal in all their Dimensions to the
Thicknes of the Body of one Vertebra;
and what is apt to excite the Admiration of
every one, is, that in our Repository we
keep seven Vertebrae of the Back, con-
creted together by Ancylosis, or bony Sub-
stance, and incurvated so much into a Cir-
cle, that the Body of the upper Vertebra
unites with the Body of the lowermost. The
Bodies of these four Vertebrae are scarce
equal to the Body of one. We always
see, that in crooked, or Hump-back'd
People,

People, the Spine of the Back is inflected; but for the Spine to be so much incurvated, that its upper Part should conjoin or unite with its lower, is what deserves the greatest Admiration. That the Person was Hump-backed to whom these Vertebrae belonged, there is not the least Room to doubt; but I cannot imagine how the Bodies of the Vertebrae should be thus incurvated into a Circle, as if they were forced by a Press, without injuring the Spinal Medulla, so tender and important a Part, that it cannot sustain the least Injury without the highest Detriment to the Body. If indeed the forementioned Disorder was born with the Person, the Case would not be so wonderful; but it seems probable, that the Vertebrae contracted this Incurvation after the Birth; and that the Bodies of the Vertebrae are thus reduced almost to nothing in many who have been Hump-backed, is evident from the several Specimens which are preserved in our Repository.

O B S E R-

OBSERVAT. LXVIII.

The Stomach and Intestines prodigiously contracted by Abstinence.

AFTER long Abstinence and severe Pains, the Body is not only much emaciated, but sometimes also the Stomach, with its annexed Intestines, are so contracted, that I have observed them to bear the least Resemblance to what they ought to be in their natural State. An Instance of this Disorder we exhibited in the Body of a certain Nobleman, in the Presence of several Surgeons and Physicians ; in which Patient the Stomach was so much contracted, that one might have very fairly affirmed it to be degenerated into an Intestine.

OBSER-

OBSERVAT. LXIX.

The Valves of the Heart ossified and concreted together.

TO find Bones in the human Heart, is a Thing not absolutely unprecedented; but no Author that I have hitherto read takes any Notice of the Valves of the Heart being ossified and concreted together. A certain Merchant complained for a long Time of an Asthma and Disopnoea, his Pulse becoming at length so small, that no one could perceive it for some Days; the Patient in the mean Time falling into continual Faintings, 'till at length finding no Relief from any Remedies, he expired. I had by the Interest of the Physicians who attended, an Opportunity to open this Patient, in whose Thorax I searched for the Cause of the Disorder, not without answering my Expectations; for the whole Thorax appeared full of a watery Humour,

Humour, and upon inspecting into the Heart, upon the Account of the frequent Faintings and Deficiency of the Pulse, which attended the Patient towards the latter End of this Disorder, I observed the semilunar Valves of the Heart so much disfigured, ossified and concreted together at the Entrance of the Aorta, that there did not remain any visible Passage into the latter from the Heart. Perhaps it may be here asked how the Patient could live, since the Ingress of the Blood from the Heart was totally prevented by the Ossification and Concretion of the semilunar Valves; to which I answer, that the Blood doubtless continued its Course sufficient to maintain Life for some Time, till it was at length extinguished by the compleat or entire Exclusion of the 'fore-mentioned Passage. I said before that I could not perceive any natural Aperture through the Valves, and that the Pulse was not perceptible in the Patient towards the latter End of his Disorder; but it does not from thence
I follow,

follow, that at that Time the Pulse and Course of the Blood from the Heart was totally suppressed; for so long as he lived, no Doubt but the Pulse and Efflux of the Blood from the Heart continued, and when they ceased the Patient expired.



OBSERVAT. LXX.

An Induration, or Ossification of the Peritonæum in several Parts, and of the Vena Portæ in a dropical Woman.

THAT several Parts of the Body become indurated, and even ossified after Consumptions and Wastings of the Body, is universally known, almost to every one; but that the same Accidents may likewise happen in dropical Patients, is evident from the following Instance. A Woman with Child, and
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at the same Time dropfical, was, during the whole Time of her Pregnancy, perplexed with a whole Train of Disorders; and even after she was delivered of a mature Fœtus, she continued to be oppressed with an Ascites, Anguish in the Præcordia, intolerable Pains, &c. 'till at length it pleased God to put an End to her Miseries by Death. Upon opening the Body, there was a free Discharge given to the watery Humour; after which I observed the Peritonæum in several Places indurated with Particles, which resembled Grains of Sand, and the Vena Porta was found in part ossified, which last I reserve in my Repository. The rest of the Viscera appeared well enough constituted, except the Omentum, which was entirely consumed.

OBSERVAT. LXXI.

A fatal Deficiency of the Skin round the Navel in a Fœtus.

I Have many Times observed new-born Infants, in which the Skin and Muscles of the Abdomen have been absent for the Compass of a Shilling round the Navel, so that in that Part the Intestines were covered only with a thin Skin. This Disorder I have indeed often observed, but never cured, for every one of these Infants have passed from the Womb to the Grave within the Space of six, seven, eight, or nine Days. This Disorder is by some called Hernia Umbilicalis, from which Disorder this is however very different, for it cannot be termed an umbilical Rupture before the Navel is formed, as in new-born Infants who have as yet no Navel, unless we understand that Term in so large a Sense, as to sometimes intend the Navel String

String for the Navel. The Navel, properly speaking, is that wrinkled Portion of the Skin which is protuberant in the Middle of the Abdomen, and which remains when the Navel String is fallen off after the Birth ; and this being frequently distended to a great Degree, is termed an umbilical Hernia, or Rupture. But in the present Case, we have a Disorder, not of Magnitude, but of Number ; for the Skin, together with its subjacent Muscles, are absent round the Navel String, which last is therefore so much extenuated round its Insertion into the Abdomen, that it seems to be only a thin Skin, through which the Intestines are visible. As this Disorder admits not of a perfect Cure, therefore the Infant is to be relieved by one that is palliative, only by applying Emplastrum Diaporpholigos, or the like, which has not too great a Tenacity, lest by adhering too firmly to the thin Skin, it might rend open a Passage for the contained Viscera to prolapse.

OBSERVAT. LXXII.

*A Prolapsion of the Viscera from a
Deficiency of the Skin round the
Navel in a Fœtus.*

FROM the preceding Disorder I once observed a much more deplorable Malady follow, when the Birth of the Infant proved more than usually difficult; namely, I have observed a Prolapsion of the Stomach, Intestines and Spleen, from the Cavity of the Abdomen, the Fœtus yet living for several Hours, although the several 'fore-mentioned Viscera were naked and destitute of all their Integuments; here it was not difficult for us to see the peristaltic Motion of the Intestines. One may easily imagine how much the Reputation of a Midwife must suffer, who should happen to meet with this Accident in the Birth, and at the same Time Physicians are called who have never seen, or know nothing of this

this Disorder; for the Viscera burst forth in this Case, not for any Fault in the Midwife, but from a Deficiency of the Skin and subjacent Muscles, whence the Viscera cannot be confined, especially in a more difficult Birth.



OBSERVAT. LXXIII.

A very remarkable Case of the preceding Deficiency in the Skin and abdominal Muscles.

Once observed the 'fore-mentioned Disorder in a Foetus after the Birth, in which there was a Deficiency of the greatest Part of the Skin and Muscles in the anterior Part of the Abdomen. We here observed the Viscera covered only with the Peritonæum, which was so thin, that we could not only see the Viscera very distinctly, but also the peristaltic

ristaltic Motion of the Intestines. This Infant lived two Days.



OBSERVAT. LXXIV.

A voracious, or canine Appetite, from a Relaxation of the Pylorus.

ALthough there may be various Causes of a canine Appetite and Lientery concealed within the Viscera, yet I could never observe any more evident than that which I lately found in dissecting the Body of a Woman, in the Presence of the most experienced *Smeding*. A certain Woman had been for a long Time troubled with a canine Appetite, or perpetual Desire of Eating, because the Stomach being distended with Food, could not long retain the same, on Account of the Relaxation of the Pylorus; and from hence the Intestines

testines discharged the Food quicker than they ought, their Office being indeed to further digest, or concoct the Aliment, but not to convert the gross Food into Chyle; and from hence therefore she almost constantly complained of Pains in her Bowels a little after a Meal; and thus she continued with an Increase of the Disorder, till she at length expired. After opening the Body, the Viscera were found well constituted, except only the Stomach, whose Pylorus, as we observed a little before, was so much relaxed, that it would receive all one's Fingers together.

OBSERVAT. LXXV.

A considerable Wound of the Bladder happily cured, but followed with an hernial Tumor.

HOW dangerous Wounds are when inflicted in the Bottom, or Sides of the Bladder, may appear, inasmuch as many pronounce them mortal. That they are very difficult to cure, and are often attended with the most grievous Symptoms, there is not the least Room to doubt; and every one will confess, that it is very rare for considerable Wounds in this Part, to be brought to Consolidation, which yet is sometimes observed to succeed. About a Year ago, a Citizen of *Amsterdam* was wounded in the Hypogastrium, the Bladder being at the same Time divided in such a Manner, that it could no longer evacuate so much as a Drop of Urine through the Penis; but on the contrary, there was
so

so much Urine daily discharged through the Wound, that the Patient in a Manner swam in his Bed. The Scrotum swelling soon after the Wound was inflicted, at length degenerated into a Gangrene, not without fainting Fits. To this Gangrene were applied Cataplasms of the Crumb of Bread, mixed with Water, Hemlock and Wine, by which the Patient was much relieved, and the Gangrene soon restrained; and by the Application of two Sponges to the Side of the Wound, the greatest Part of the Urine was absorbed. After some Days Application of farcotic Medicines, spread upon Lint to the Lips of the Wound, we perceived a small Incarnation, and a Quantity of grumous Blood was discharged, with several Drops of Urine through the Penis, which gave Encouragement both to ourselves and the Patient. On the following Days the Incarnation was so far advanced, that the Patient discharged all his Urine through the Penis, and was soon after cured,

without any remaining Complaint, except that lately he has complained of a slight Pain about the Cicatrix of the Wound, without any remarkable Cause preceding; and the Part itself by degrees began to be distended into a Tumor, which was doubtless a Hernia; for this I have frequently experienced, that after the Cure of Wounds penetrating the Cavity of the Abdomen, a Hernia has followed, because the Peritonæum can seldom be brought to a perfect Union, and therefore they act prudently who wear a Belt for some Years after the Cure, to prevent a Hernia. I was assisted in the Cure of this Patient by the eminent Physician Dr. *Wenden*, and the expert Surgeon Mr. *John Wall*.

O B S E R-

OBSERVAT. LXXVI.

*An ulcerous Hardness of the Tongue
extirpated by the Scalpel and
Cautery.*

THE Inscription upon the *Dutch*
Money, with respect to the Sea,
idem Tutor & Hostis, is true with respect
to our Teeth, which when in a good
Condition, do not only defend the
Tongue and Fauces, but also divide the
Aliment, modulate our Speech, and
serve many other Purposes; but on the
contrary, when they are disordered, they
prove our most troublesome Enemies.
There is not a Part in the Body that ex-
cites such excruciating Pains as the Teeth,
when carious; nor do they spare the
Tongue, which is sometimes so much
ulcerated and indurated by the Asperities
of the Teeth, as to destroy the Patient.
I could produce various Instances of their
fatal Effects, if it were not in this Place
foreign

foreign to our Design. We shall therefore only observe, how the Tongue is to be cured when it has been not only indurated, but ulcerated from this Cause. The Cure in this Case must be always begun by an Extraction, or filing down of the Teeth which produced the Mischief, and in the mean Time the Tongue itself is to be treated with Mel Rosarum, acidulated with a few Drops of the Oil of Vitriol, the Application of which is to be frequently renewed in a Day, because it does not continue long upon the affected Part; but if the Disorder yields not to this, or the like Remedies, the Tumor in the mean Time increasing, the Part affected becoming more and more ulcerated and fungous, the Lips turning back, in that Case, the whole indurated and ulcerated Part of the Tongue is to be extirpated, and afterwards cauterized; for I have by Experience learned, that nothing is more effectual when the Signs of Malignity appears, than the Application of actual Cauteries,

Cauteries, after the vitiated Part has been extirpated. There are indeed some who prefer the potential Cautey, but with less Prudence. A certain old Woman, who had been a long Time afflicted with this Disorder, which had returned again, after repeated Extirpations, implored our Assistance. I therefore consulted with the Surgeon who had before amputated the diseased Part to no Purpose, even though the Incision was made sufficiently deep; and after deliberating upon the Means to root out the Disorder, and prevent its Return, we determined to repeat the Extirpation, and afterwards to burn the Part with large and convenient Cauteries. After the Patient was informed by us that ^{her} our Case was not desperate, but that there still remained a Remedy by Amputation, followed with a Cauterization, she readily consented, and underwent the Operation with so firm and intrepid a Mind, that she hardly made the least Noise with her Cries. After Universals premised, we therefore took

took hold of the Tongue with a linnen Cloth, by which it might be more conveniently drawn out of the Mouth, after which the other Surgeon extirpated the whole diseased Part with a sharp and crooked Scalpel, which being done, we applied a Piece of Linnen, dipped in cold Water, to the internal Surface of the Cheek, that it might not be injured by the Cautery; and then we sufficiently cauterized the Part affected, forcibly pressing down the Cautery, and several Times repeating it. After the Operation was over, an emollient Gargarism, or Mouth-wash, was used to mitigate the Pain, and promote the Separation of the Eschars, which being effected, the Cure was soon after compleated, with Tincture of Myrrh and Aloes, mixed with Decoctions of drying Ingredients, with Honey of Roses, &c. After the Cure was in this Manner compleated, the old Woman continued well, and free from any Return of her Disorder.

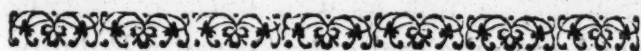
O B S E R-

OBSERVAT. LXXVII.

A Polypus seated in the Antrum Highmorianum.

WHAT a Polypus is in the Nose, every one is well acquainted, but the true Seat, or Part from whence it arises, is not so well known. There are some who make the Seat of a Polypus to be only in the Nose, others in the Fauces, and others again tell us, that the Ears are infested with the same fleshy Excrescencies. But we have twice found Polypus's seated in a Cavity of the upper Jaw-bone, to which *Highmore* gives the Denomination of Antrum. I once observed a Polypus in this Cavity in a publick Dissection; and I a second Time observed the same Disorder seated in the Antrum Highmorianum in a Woman, who was much afflicted with a malignant Tumor and Excrecence of the Gums. Mr. *Peter Adrian* the Younger, and
Van

Van Ulsen, together with myself, extracted some of the grinding Teeth in this Patient, after which they cauterized the affected Part, by passing an actual Cautery into the Cavity of the 'fore-mentioned Antrum, from whence on the following Days we thrust out a great Number of Polypus's by the little Finger.



OBSERVAT. LXXVIII.

An internal Scabies of the Bladder, accompanied with several Excrescencies, partly fleshy, and partly glandular.

ALthough the Skin is the proper Subject of the Leprosy, yet I have sometimes observed almost the same Disorder seated in the internal Coat of the Bladder, accompanied with a violent Pain, and frequent Desire of making

making Water, the Urine itself appearing purulent, and the Bladder as thick as one's Finger. From this Disorder of the Bladder, Tumors, or fleshy Excrescencies, in some Measure glandular, are formed, sprouting out from the internal Coat of the Bladder; so that when these Excrescencies are seated near the Neck of the Bladder, they frequently cause an Ischuria, in which the Urine cannot be evacuated from the Bladder, but by introducing the Catheter.

OBSER-

OBSERVAT. LXXIX.

*A wonderful Lusus Naturæ in the
Vessels of the Kidneys.*

THE Variations, or Lusus Naturæ which we discover in the Parts of the human Body by Dissection, happens no where more frequently than in the Vessels of the Kidneys. With respect to the renal Arteries, which are called the Emulgents, they are sometimes found double or triple at their Origin from the Aorta, from whence however they generally arise single. But before these renal Arteries enter the Kidneys, they are variously ramed, being split into two, three, or more Branches, of which I keep several Specimens in my Repository. With respect to the Ureters and Pelvis, though we generally observe that each Kidney is furnished with only one, yet I have sometimes found the Pelvis and Ureter divided into two, or even three, of which

we

we have a Specimen among our anatomical Rarities. This Pelvis of the Kidney I have frequently observed so much dilated by Stones and Obstructions of the Urine, that they have been capacious enough to receive the Kidney itself. Although likewise the Ureters are generally single, yet on the contrary I publickly demonstrated in a Body three Years ago a left Kidney, furnished with two Ureters, one of which arose from the upper Part, and the other from the lower Part of the Kidney; and by freeing these Ureters from their Integuments, I found both of them united into one before their Insertion into the Bladder; and although the same Thing has been observed by *Riolin*, yet I judged this to be so rare a Variation, that I prepared and preserved the 'fore-mentioned Bladder, with its double Ureter, and have placed it among my other anatomical Rarities.

OBSER-

OBSERVAT. LXXX.

The Kidney unequally surfaced, or divided into Lobules in an Adult.

IT is well known, that the Surface of the Kidneys in Adults is very smooth, but that in new-born Infants they are composed of many distinct Parts, and as it were of an Assemblage of separate Glands, whence their Surface appears very unequal and divided; but it is very rare to find this Inequality of the Surface of the Kidneys continued in adult Persons, as I observed in a Body which I lately dissected.

OBSER-

OBSERVAT. LXXXI.

A spongy Tumor, of a particular Kind, destroying the Bones, sometimes called a White Swelling.

AMong all the Tumors which I have hitherto observed, I do not remember to have ever seen one so large as that which I observed, in Company with the often-mentioned Mr. *Andrew Boekelman*, in a Village near *Amsterdam*. The afflicted Patient was a Taylor, whose Thigh was invaded with two large spongy Tumors, one of which a few Days before Death, measured an Ell and three Quarters in Circumference, and the other measured only a Quarter of an Ell. This Disorder is by way of Eminence termed a spongy Tumor, although there are many other spongy Tumors, which have no Affinity with the present. The *Germans* also give it a Name from its Sponginess,

Sponginess, and with us in *Holland* it is termed, with some Reason, Bone-eater, for I never found this Disorder after Death without a Corruption of the Bone; from whence one might conjecture the Tumor to arise generally from a bad Constitution, or Disposition of the Bone, and this rather, because we know that it frequently proceeds from a violent Blow, or Collision of a Bone by a Fall, &c. Although no Surgeon ought to be ignorant of this Disorder, yet I have found many, who from their Ignorance, neither consulting their own Reputation, nor the Interest of their Patient, have rashly opened this Tumor by the Scalpel, imagining to find it filled with Matter, instead of which they have found a lymphatic and bloody Humour always discharging itself; and what is most to be lamented, after opening the Tumor by the Scalpel, a Gangrene generally follows, and soon after, Death itself. This Disorder is known from its arising from little or no Pain, advancing slowly

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at first, but afterwards increasing very swiftly, having large and livid Blood-vessels dispersed through the Tumor, and which I have seen so much enlarged or expanded, that they have burst spontaneously, and suddenly killed the Patient. The Tumor generally appears soft, as if it was in a great Measure humoral; and it most frequently is seated in the Limbs, especially the Leg. I must again observe, that if this Tumor be opened by the Scalpel, the Patient is deprived of Life in a short Time after. But when, as it frequently happens, this Tumor breaks spontaneously, either by an Ulceration, or Excoriation, the Patient often survives for a long Time after. I have also observed, that when the Tumor is not opened before Death, the corrupted Part. of the Bone is not tinged with a black Colour, but although it be carious, it retains its natural white Colour; but on the contrary, I have always observed, that if the Tumor was opened before Death, the Air causes the

K
Bone

Bone to turn very black, and it may then be pressed betwixt the Fingers like a Pulp.



OBSERVAT. LXXXII.

The Alveoli, or Sockets of the Teeth, totally consumed by various Causes, whence a Looseness and falling out of the Teeth.

RELATED to the Disorder of the Bones described in Observation LXVII. is the Obliteration of the Alveoli, or Sockets of the Teeth, in such a Manner, that they often leave not the least Marks. It is a Thing universally received for true, that the Alveoli, or Sockets of the Teeth, never remain open after the Teeth have been pulled out, or tumbled out of their own Accord; to which Opinion, I also give my Assent.

But

But what it is that happens commonly in this closing up of the Sockets, is not unanimously enough agreed upon by the principal Anatomists. The Curious enquire into the Structure of the Parts of the Body. *Thomas Bartholin*, in speaking of the Sockets of the Teeth, has the following Passage in Cap. 9, Fol 720, of his Anatomy; sometimes, says he, they are obliterated and closed up after the Teeth are extracted, or fallen out. It is no uncommon Thing for the Sockets of the Teeth to be obliterated in old Age, when the Teeth have been lost, and the Sides, or Circumference of those Sockets becoming more acute and hard; they serve in old People for Mastication in the Room of Teeth. *Spigelius*, in treating upon this Subject, says, there are as many Sockets as Teeth, since each Tooth at its first Eruption is lodged in its peculiar Cell, and when extracted or lost, the Socket is likewise destroyed, together with the Tooth, in such a Manner, that there is not the least Sign

of a Cavity remaining. *Riolen*, in his *Anthropographia*, says, that when a Tooth is pulled out, unless a new one succeeds, the Socket is so obscured and closed together, that there is not the least Sign thereof remaining.

It is not my Design here to refute any of these Anatomists, but rather to illustrate their Observations; namely, that not only the Sockets of the Teeth are obliterated in old People, and their Circles, or Margins rendered more acute and compact or hard for Mastication, that is to say, that the Sockets collapse, or are closed up; but moreover, that in many they are so reduced to nothing, that, wonderful to behold, both the upper and lower Jaw lose all that Part of their Depth which was taken up by the Alveoli, insomuch, that the lower Jaw hardly continues of the Thickness of one's little Finger, and the upper Jaw is worn away or deficient almost up to the Nose. Hence the Foramina, through which a Branch of the Nerve
of

of the fourth Pair is transmitted, is not to be found in the anterior or lateral Part of the lower Jaw in old People, as it is in the Jaws of those who retain all their Teeth; for when the Teeth have been lost, these Foramina are to be found in the upper Part of the lower Jaw. Hence also the upper Jaw loses so much of its Height, that there is scarce the Breadth of a Quill betwixt the Nose and Mouth. The Cause of this Destruction, or rather Annihilation of the Sockets of the Teeth, cannot well be ascribed only to the Pressure and Attrition of the Jaws in Mastication; for we frequently see, that when a Tooth only is pulled out, its Socket is in the same Manner abolished, though the next adjacent Teeth defend the same from Attrition. It even frequently happens, that the Sockets are obliterated before the Teeth are extracted, or fallen out, so that the tottering Teeth are only sustained by the Gums and Membranes, and when the Gums have been absent, the Teeth

have been found adhering only by the Membranes; in such a Case therefore it is in vain for the Patient to seek for some certain Remedy to render the Teeth more firm, supposing the Disorder to arise from the Scurvy, and not at all dreaming that their Sockets are wanting. But I would not have my Reader think, that this Disorder happens only to those who are far advanced in Years; for I remember to have seen this Case in a Person of but thirty Years of Age, who in this Manner had several of the fore Teeth loose, 'till at length, finding no Benefit from the Use of antiscorbutic Medicines, he easily pulled them out with his Fingers only. In some again, as I have said before, I have observed the Gums perished together with the Sockets; and in that Case the Teeth have adhered to the Jaws only by the Membranes, and that so loosely, that the Patient has not been able to eat, but the Teeth have even shook and displaced by the Motion of the Tongue only in Speech.

Speech. I said before that the Sockets of the Teeth could not be obliterated by the Attrition only of the Food in Mastication, nor do I suppose them to be always closed up, collapsed, or obscured by a bony Skin, or Callus, but that in some old People they are totally abolished and reduced to nothing, in the same Manner as the umbilical Arteries in the Foetus after Birth often degenerate into a thin Membrane, as if they had never been Arteries; and in the same Manner also the Breasts frequently shrink up in old Age. If therefore the Sockets of the Teeth are naturally formed very thin, when the Teeth are extracted, or fallen out, they will have nothing to fill up their Cavities, and therefore the Jaw will be so much shortened or diminished. But if the Sockets are abolished before the Teeth themselves fall out, I know of no other Cause than the Scurvy, and a tartarous, or stony Matter gathering about the Teeth, by which not only the Gums,

but also the Sockets themselves of the Teeth are by degrees consumed.



OBSERVAT. LXXXIII.

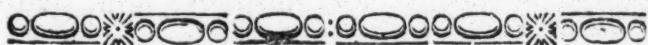
Barrenness from a Concretion, or closing up of the Fallopian Tubes.

WE meet with many Causes of Barrenness in Women, among which a Concretion, or closing up of the Fallopian Tubes is to be esteemed none of the least; and this Concretion I observed may take Place either at their Insertion in the Uterus, or at the other Extremity, next the Ovarium. If I had not dissected such a great Number of Bodies, I should never have believed that the Fallopian Tubes, or Oviducts are so frequently closed up in Women as I find they are, which may often follow from a difficult Labour,

or

or from other Pains in the Abdomen, from which these Parts are frequently affected with a slight Inflammation; and what is worthy of Observation, if the Tubes are closed at their Extremities farthest from the Uterus, they generally cohere very firmly with the Ovaries, which still confirms our Opinion of the Cause; for we frequently see, that after the Viscera have been inflamed, they contract and grow together. Moreover, in this Case I have frequently found the Tubes very much distended, especially towards their Extremities next the Ovaria, a Specimen of which I keep in my Repository; and this Distension has been also observed by the very accurate Anatomist *De Graff*, in his Treatise *De Mulierum Organis, &c. Pag. 356*. I am apt to believe that this preternatural Extension arises from a closing up of the Tubes, the Humours and Flatus at the same Time endeavouring to escape out of the Cavity of the Uterus, while the Os tincæ is at the same Time strictly

contracted or shut, and this will appear still more probable from perusing the following Observations.



OBSERVAT. LXXXIV.

A probable Eruption of the Lochia through the Fallopian Tubes into the Cavity of the Abdomen.

I Lately visited a Woman in the *Calver-street* of this City, who had lately lain in, afflicted with a violent Fever, and complaining of an Induration and Tension in the Hypogastrium, not without intense Pain. Emollient and anodyne Remedies were applied, but these proving ineffectual, she soon after expired. Having opened the Abdomen, I found a great Quantity of foetid Matter in the Pelvis, resembling the Washings of Flesh, or rather the Lochia
cor-

corrupted, and the like I also found in the Cavity of the Uterus. This increased my Suspicion that the 'fore-mentioned Humour was conveyed into the Cavity of the Abdomen and Pelvis through the Fallopian Tubes, or Oviducts; and that this frequently happens to lying-in Women, when their Pains and Throws in Parturition are violent, and the Os Uteri at the same Time so strictly shut up, that the Lochia cannot find themselves a Passage that Way; or even in the difficult Birth itself, the Head of the Foetus stopping up the 'fore-mentioned Passage, the Humours retained in the Womb behind the Foetus, are not able to find any other Passage; hence there is not the least Reason to doubt but those intense Pains of the Hypogastrium are derived, of which lying-in Women frequently complain.

OBSERVAT. LXXXV.

A probable Eruption of the Menfes through the Fallopian Tube into the Pelvis.

I Before observed that it was probable the Humours contained in the Uterus, might be derived into the Cavity of the Pelvis and Abdomen through the Fallopian Tubes or Oviducts in Child-bed Women. Nor does it seem less probable, that Blood extravasated into the Cavity of the Uterus while the Os tincæ is strictly closed, may be conveyed from thence through the 'forementioned Tubes into the Pelvis, even when the Woman does not lie in; I shall therefore alledge an Instance in Favour of this Probability. *Rothbuse*, an expert Surgeon (in Company with Dr. *Dortmunde*, a worthy Physician of our Hospital, and Mr. *Adrian Conerding*, Surgeon) opened the Body of a Woman who expired in
her

her Menfes, in the Cavity of whose Uterus he observed a Quantity of congealed Blood, slightly adhering to the Uterus, with which Blood the Fallopian Tube of the fame Side was not only coloured, but alfo the Ovarium, upon whose Surface a large Quantity of the congealed Blood firmly adhered. This Uterus, together with its annexed Ovary and congealed Blood, I now keep in my Repository, preferved in the fame Manner as they were demonftrated to me by the forementioned Gentlemen, being fo preferved with Balsam, that every Part retains its natural Figure, Magnitude and Pofition, without thofe Wrinkles which are often ufed to remain after drying.

OBSER-

OBSERVAT. LXXXVI.

The Liver disordered in a dropfical Body.

ALthough in dropfical People the Glands of the Liver especially are often indurated, yet I do not always find that these Cafes correspond well with each other. The Livers of some dropfical People are intirely indurated, and yet the Surface remains equal, and the Glands invifible; whereas fometimes the fmall Glands are fo much enlarged, that they become protuberant throughout the whole Surface of the Liver. Even fometimes these Glands are as large as Filberts. I lately difsected the Body of a certain dropfical Patient, who at length fell into an Afcites, after being troubled with oedematous, or fwelled Legs, for near the Space of three Years. In the Thorax we found nothing amifs, notwithstanding the Patient was afflicted with

with extreme and continual Anxieties; all the Viscera of the Abdomen were likewise well-conditioned, except only the Liver, which we found entirely indurated, with its Surface unequal on all Sides from an Induration of the small Glands of that Viscus, which were greatly distended in Bulk. Some of these Glands were about the Size of Pins Heads, and others as large as Peas. In the Cavity of the Abdomen we also found a large Quantity of Water without any considerable Smell.

OBSER-

OBSERVAT. LXXXVII.

A scirrhus Liver in another dropical Patient, accompanied with a Stone in the Duct of the Gall-bladder.

A Man who had been a long Time afflicted with an Ascites, having tried many Remedies to no Purpose, at length expired. Upon opening the Body, in Company with Mr. *Joachim Schrader*, none of the Viscera appeared ill-conditioned, except the Liver, which was indurated; the Gall-bladder was also exceeding large, and appeared distended with a watery Humour, not at all bitter, nor like Bile; and in the cystic Duct we found a little Stone, about the Magnitude of a large Vetch, entirely obstructing the Duct of the Gall-bladder.

OBSERV.

OBSERVAT. LXXXVIII.

The Uterus drawn to one Side of the Abdomen.

I Have several Times observed and perceived by my Fingers, in Women complaining of a Pain in the Hypogastrium, and continual Desire of making Water, with a Tenesmus, that the Uterus has been preternaturally distorted, either to one Side or the other of the Abdomen ; but I only once found the Os Uteri drawn towards the left Side in a dead Body. What Disorder the Patient lay under from thence I cannot say, not having had the Care of her ; but this I know, that her Death could not have proceeded from that Cause. But it is probable that the Patient must have received some Uneasiness from thence, because that perverse Situation of the Uterus must in some Measure impede the Discharge of the Urine ; for in Proportion

portion as the Os Uteri is drawn towards one Side or the other, the Neck of the Bladder being thereto strictly connected, will be also drawn that Way. In this Uterus we also observed something very uncommon, namely, a third round Ligament arising not from the Bottom, but from the Side of the Neck of the Uterus.



OBSERVAT. LXXXIX.

A Stone in the Bladder, accompanied with a purulent Incrassation of its Coats.

IN the Year 1672, a young Man of about twenty-five Years of Age, afflicted with the Stone in the Bladder, underwent the Operation of Lithotomy in our Hospital of *Amsterdam*; but, contrary to Expectation, the Operator could not extract the Stone, even though he
had

had firm Hold of it by the Forceps, and extracted several Fragments. The Patient at length expiring, I opened the Body, and found the Stone so strictly retained and compressed by the Bladder, that there was Room only for the Reception of a few Drops of Urine. The Bladder was equal in Thickness to a Finger's Breadth, and divisible into an infinite Number of Tunics, betwixt which was found a considerable Quantity of Matter in many Parts, nearly resembling melted Tallow. This purulent Matter was plentifully discharged from the Wound which I made, almost in the same Manner as we observe Water to be discharged from oedematous Swellings of the Legs, after an Incision has been made through the Integuments in a dead Body. Betwixt the Stone and the Bladder there was nothing of the 'fore-mentioned purulent Matter observed, even though I found some of the same Matter concealed betwixt the Coats of the Ureters, and betwixt the Coats which invest the Kidneys.

O B S E R-

OBSERVAT. XC.

The Gall-bladder frequently divided, especially in Calves, but very seldom, if ever, found perfectly double.

THERE are many Observations extant in the Writings of Anatomists concerning a double Gall-bladder found in the Liver; but I believe this *Lusus Naturæ* very rarely, if ever, happens. I have indeed many Times found the Gall-bladder divided into two Parts, more especially in Cows or Calves, of which I preserve some Specimens in my Repository; but never once did I find the Gall-bladder perfectly double. In a double Gall-bladder there must be found two cystic Ducts, without which the Gall-bladder cannot be said to be double; and I must confess, that I never could meet with one thus conditioned, all the double Gall-bladders which I have hitherto seen having been
only

only divided or partitioned into two Parts, and furnished with but one cystic Duct.



OBSERVAT. XCI.

The true Cause of the Iliac Passion demonstrated by various Instances.

Physicians are not well agreed among themselves concerning the Nature and Cause of the Iliac Passion, which is commonly called Miserere Mei. Some believe it to consist in a Contortion, or twisting round of one of the small Intestines, in the Manner which we observe in the Preparation of Catgut. Others, on the contrary, deny that the Intestines can possibly be convoluted into a Knot so long as they continue fastened to the Mesentery; but when the Mesentery is corrupted, as I have once or twice observed, they then think it very possible

possible for this Disorder to happen. But if we attend to those Appearances which we are capable of observing after Death, we ought to conclude the Iliac Passion to be a Palsy, or Relaxation of the Intestines, especially of the small ones, accompanied with frequent Vomiting, a Constipation of the Bowels, and frequently with most excruciating Pains, or even sudden Death itself. This Loss of Tone, or Inactivity of the Intestines, proceeds primarily from a partial, if not from a total Obstruction of the Nerves belonging to the Intestines, whence their Motion is suppressed, especially in the small Intestines, which are destitute of their peristaltic, or vermicular Contraction, as being destitute of animal Spirits. In the second Place, this same Disorder may arise from an Obstruction of the Intestines themselves, produced either by indurated Excrements, Bones, or other solid Bodies which have been swallowed. In the third Place, the Iliac Passion may proceed from an Introsuf-
ception,

ception, or Inversion of the Intestine, one Part of which is forced into the other, whether that proceed from a Perversion of the peristaltic Motion, or from some convulsive Motion, or from a Dilatation of some Part of the Intestine, or from too great a Stricture in the same, by which the larger Part of the Intestine is rendered capable of receiving into itself the narrower Part in this or that Motion of the Intestine. In the fourth Place, I find this Disorder may be caused by a Contraction, or shrinking up of the Intestine in some Part, which Contraction I have sometimes observed so great, that the Intestine in that Part has been hardly capable of receiving one's little Finger, denying a Passage both to Flatulencies, and to the solid Parts of the Food which had been swallowed. In the fifth Place, this Disorder frequently arises from an intestinal Hernia, or Rupture; and lastly, an Inflammation of the Intestines may be comprehended to be one of the Causes of this Disorder. I
make

make no Doubt but that this Disorder proceeded from an Obstruction of the Nerves of the Intestines, in the Wife of a certain learned Man, who lately fell into a total Constipation of the Bowels, accompanied with continual Vomitings and intense Pains, without a Fever, when sudden Death followed. I remember myself to have twice met with Instances in dead Bodies, of the Intestines ceasing from their Action so soon as they have been obstructed, either by indurated Fæces, the swallowing of Bones, or other hard Bodies. And for the third Cause of this Disorder, namely, an Introsusception of one Part of the Intestine into another, there is not the least Room to doubt of it, since I have twice publickly demonstrated the same in the Intestines of a certain Baker's Son; as also in a certain Publican, whose Bowels I took out and dissected; and in both these Patients while living, the Bowels were liable to many Disorders, but especially to Pains of the Abdomen an
Hour

Hour or two after a Meal. A third Instance of the Cause of this Disorder, I observed in a dead Body which I opened, in Company with the expert Surgeon Mr. *Joachim Schrader*. I observed also before, that the Cause of this Disorder is sometimes a Contraction, or shrinking up of the Intestines in some certain Part, because I have several Times observed in opening Bodies, that the Intestines have been so contracted, as not to be able to receive the little Finger. If therefore in this last Case the intestinal Fæces are indurated, or if Flatulencies are denied a Passage, it is evident that the Patient must be suddenly destroyed, with the most intolerable Pain and Inflammation that can happen in this very nervous and sensible Part of the Body.

L O B S E R -

OBSERVAT. XCII.

*A monstrous Dilation of the Intestinum
Colon.*

A Girl of five Years old, had been for a long Time complaining of Pains in her Bowels, to ease which carmine and antelmintic Medicines were used for some Time to no Purpose, whence the Pains continuing, she at length expired. After opening the Body, to our great Surprise, we could hardly perceive any of the abdominal Viscera, except that Part of the Colon, which begins to take the Name of Intestinum Rectum, and this by reason of an enormous Extension of the aforesaid Colon, under which all the other Viscera lay concealed.

OBSER-

OBSERVAT. XCIII.

*The imaginary, or true Motion of the
Womb.*

WHether or no the Uterus in Women who are not with Child has a Motion upward or downward, as many Authors would have us believe, is a Question not necessary for me to decide, being not only studious of Brevity, but also desirous to acquaint the Reader with nothing but what comes vouched upon my own Experience. But by the Way I must own, that it not a little surprises me, to see some Authors ascribe so great a Motion to the Uterus, as that it should be able not only to force the Diaphragm upward, but as they believe to ascend also up to the Throat. Others perswade themselves that the Uterus ascends to the Præcordia, as being dry, in order to moisten itself, supposing the Liver to

be the Fountain of radical Moisture, to partake of which the Uterus therefore ascends to the Liver. But leaving these trifling Conjectures, which are so absurd as to fall to the Ground without any Opposition, I can affirm myself to be more than certain, that the Uterus moves itself greatly in the Time of Parturition, and that all the natural Throws in the Delivery, depend almost entirely upon the Uterus; and that these Throws, or Endeavours of the Uterus to contract, do very often continue so violently after the Birth, that the Womb has inverted itself, and prolapsed out of the Body. I have experienced a few Hours after the Birth in some Women, that the Motion of the Uterus has been so very evident, that the Midwives, and even the Woman herself, have often told me, that there was still another Foetus remaining in the Womb. In this Case I have applied my Hand to the Abdomen, and perceived such a considerable Motion, as removed my Hand like a
Foetus,

Fœtus, and has even sometimes so elevated the Uterus on one Side or the other, as to occasion a round and hard Tumor, which any one not well experienced, would have taken for the Head of an Infant; and soon after I have observed the same Motion on the opposite Side. Sometimes I have imagined that I felt the Knee, sometimes the Cheeks, &c. as in Women big with Child, and near the Time of their Delivery; but after having introduced my Hand into the Uterus, I have found that it was not a Fœtus, but the Womb itself.

OBSERVAT. XCIV.

*A prodigious Dilatation of an Artery,
containing a whole Pint of Matter.*



I Have often thought nothing more worthy of Admiration, than that membranous Vessels should be often so much the thicker, in Proportion as they are more distended with some foreign Humour. This is what I have evidently demonstrated to take Place in the Arteries in Observat. XXXVII. XXXVIII. and the same is also remarkable in the present Observation of the Ureters. For the Ureters to be so much dilated, as to be able to admit the Finger, is nothing extraordinary; but it is very rare, and almost unheard-of, for one Ureter to contain a Pint of purulent Matter; and still more wonderful is it for the same Matter to make its Way through the annexed Fibres, as I shall presently relate. In the Year 1673, I opened the
Body

Body of a certain Woman (in Company with Dr. *Tongeren*, and Mr. *Van Ulsen*, Surgeon) who had been a long Time afflicted with the most severe Pains, especially upon discharging a purulent Urine, insomuch that she often wished for Death, long before it came. The Surface of the right Kidney was very unequal, and in the lower Part of the right Ureter near its Insertion into the Bladder, was lodged a Stone about the Size of a Filbert. Within the Ureter was found membranous Threads in a transverse Position; and the middle Part of the 'fore-mentioned Ureter was so much extended, that it would contain at least a Pint, being distended and filled with a purulent Matter. Upon the Surface of this distended Ureter we observed an infinite Number of small white Vessels, turgid, and about the Size of a Horse-hair, tending towards the left Hypochondrium. But to enquire exactly where they terminated, I had no Opportunity, being denied the

Privilege of making any further Scrutiny by the prejudiced Relations. These small Vessels were not lacteal, much less were they sanguiferous; nor did they in any Respect agree with lymphatic Vessels. I believe them to be a peculiar Kind of Vessels, or rather a Sort of hollow Fibres, constituting the Membranes, by Means of which the Ureters are connected to the Loins; so that from this and such like Observations, we might perhaps have an Opportunity of exactly determining those unknown Passages, which have been hitherto only conjectured by Anatomists.

O B S E R-

OBSERVAT. XCV.

A scirrhus Incrassation and Contraction of the Intestinum Rectum, following after a Dysuria.

INexpressibly great are the Disorders which afflict us poor Mortals, and so numerous are our Diseases, that no one can easily recount them; but their Attacks are in no Parts more sensible than those of the Emunctories subservient to Excretion, where if they take deep Root, it is with great Difficulty that they can be extirpated. We are under a daily Necessity of eating and drinking to support Life, and of evacuating the Superfluities of those Aliments by the proper Emunctories; but if the Passages destined for these Evacuations are intercepted, or disordered, the Consequences are such as often makes the Patient more desirous of Death than Life. A certain Friend of mine in the

Flower of his Age, of a melancholy Habit, having three Years before gone to *Ireland* upon his Business, began to complain of a Difficulty in making Water, which in a little Time so much increased, that he was constantly obliged to discharge his Urine by Drops, and that with so much Pain and continual Straining, that he was not able to support it. Even in a little Time after, another Disease of no less Moment began to shew itself, namely, an Impotency of freely discharging the intestinal Fæces, arising no doubt from those continual Strainings to discharge his Urine, from whence the Intestinum Rectum was not only incrassated and rendered scirrhus, but also for the most Part concreted together; for it was with great Difficulty that it would admit even of a Probe of the Thickness of a Straw, whence the Patient was disabled from discharging both his Urine and intestinal Fæces, unless by Drops, and with a continual Mixture of ichorous and purulent Matter, with

with such lasting and excruciating Pains, that all People could not bear to be in his Company. At length returning into his own Country, he came to *Amsterdam* to consult myself and others, but to no Purpose, his Disorders being then incurable. These Disorders continually increasing, the Patient at length expired, and left us an Opportunity of enquiring more fully into the Nature of his Disorders. Upon opening the Body therefore, I found a frightful Stone in the Pelvis of each Kidney, and also another large Stone in the Middle of the right Kidney. The Bladder and Ureters were well constituted, but the Intestinum Rectum was so much incrassated throughout, and indurated, that it was above an Inch thick, and of so firm a Consistence, that I doubted, whether to call it a cartilaginous, or fleshy Substance. The Cavity of the 'fore-mentioned Intestinum Rectum was likewise scarcely larger than a Straw, and what is remarkable, it adhered so firmly

to the Os Sacrum, that the Point of a Knife was not by any Means sufficient to separate them, but I was obliged to use a Chissel and Mallet, and even with those, to my Surprise, I found much Difficulty in disjoining them. All those Parts were prepared with our Balsam, and are reserved in our Repository, in Memory of the Patient and his extraordinary Case.

OBSERVAT. XCVI.

*A like Incrassation of the Intestinum
Rectum.*

A Certain Nobleman here at *Amsterdam* lately expired of a like Incrassation and Scirrhoty of the Intestinum Rectum, being for a long Time afflicted with the same Pains and Strainings to discharge the intestinal
Fæces.

Fæces. But in this Patient the said Intestine was not so much contracted, but that one might by a strong Pressure introduce the little Finger. This Disorder seldom occurring, and but little known, is attempted to be cured different Ways, some supposing it to proceed from the Piles, have concluded that they were to have been removed by Incision, which was here tried to no Purpose. Myself, who attended this Patient several Times, judged the Disorder to be a Scirrhusity of the Intestinum Rectum, as appeared in the Event; but as the Patient was very willing to have the Part laid open by Incision, and even urged for the same to be performed, to which I consented, but all was without Success, for he died in a few Weeks after. But in such a Case, a palliative Cure is most advisable, that is, by emollient and anodyne Clysters; for powerful Remedies are often attended with the worst Consequences, when those which are mild do no Mischief,

chief, but ease the Pains, and afford more or less Relief to the Patient.



OBSERVAT. XCVII.

The Extraction of the Placenta impeded by a particular Insertion of the Funiculus into it.

Midwives are frequently surpris'd at the Difficulty they meet with in extracting the Placenta after the Fœtus has been delivered, which is thought much more extraordinary by others who are ignorant of the Matter; but if this be duly considered, there is no Room for any Person to wonder, for it is frequently not in the Power of the Midwife to extract the Placenta according to their Desire; but the Cause of this Retention of the Placenta has not yet been sufficiently explained by any one. Some give

give out that the Placenta adheres too strictly to the Uterus, by Means of a more firm Concretion of the Vessels of the Uterus with those of the Placenta; but in this I must own that I think them mistaken. Others place the Cause of this Difficulty of extracting the Placenta in a Laxity, or Putrefaction of its Substance, or in too great a Stricture of the Os Uteri. But no one that I know of, has made Mention of the central Insertion of the Funiculus into the Placenta, which is one of the chief Obstacles to its easy Extraction, for when the Funiculus is inserted exactly into the Center of the Placenta, it generally separates from it with much Difficulty, insomuch, that Midwives are frequently obliged to wound such a Placenta with their Forefinger, in order to make it separate; whereas, if the Funiculus was inserted, either to one Side or the other, the Placenta would then easily follow the Foetus. The Reason of this is, the same as that of a round Piece of Leather,

3

formed

formed into a Sucker, with a String in the Center of it ; for when that Piece of Leather is wetted, and applied to a heavy Stone, it will easily lift up a Stone from the Earth without being pulled off ; but if the String is fastened to one Side of the Leather, it will not be capable of producing that Effect.



OBSERVAT. XCVIII.

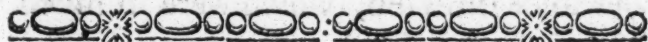
A cystic Hernia, accompanied with a Bubonocoele from a Fright.

THAT a Hernia is rather an Extension, or a Dilatation of the Peritonæum, than a Rupture, or Laceration of that Membrane, is I believe universally allowed by Physicians. The present Disorder is denominated according to its Contents ; thus a Hernia is said to be intestinal, when the dilated Peritonæum

tonæum contains the Intestines, &c. By the same Rule also when the urinary Bladder prolapses into the Scrotum, the Disorder is to be called a cystic Hernia, of which I have observed two Instances, in Company with the expert Surgeon Mr. *Andrew Boekelman*. A certain Merchant of *Amsterdam*, was for some Years troubled with such a Difficulty of making Water, that he could not discharge his Urine unless he compressed and elevated the Scrotum with his Hand. He concealed this Disorder so long, 'till at length it was to our great Surprise accompanied with a Bubonocoele only from a Fright; for a large Cask of Wine burst suddenly in his Cellar; at which being present he was instantly so much surprised, that he immediately fell into a Bubonocoele. This is what I had once an Opportunity of observing in another Patient, who was suddenly afflicted with a Hernia only from a Fright; and the 'fore-mentioned Surgeon, who is extremely well versed in the Cure of Ruptures,

tures, acquainted me that he had several Times observed them to proceed from the same Cause. The Patient being thus afflicted with a Bubonocèle was obliged to call in the Assistance of myself and Dr. *Bellanger*, Mr. *Andrew Boekelman*, Mr. *Peter La Nou*, and Mr. *Peter Adrian* the Younger, very expert Surgeons. But the Bubonocèle was so strictly compressed by the Tendons of the adjacent Muscles, that our Patient could not be at all relieved, but expired in a short Time. The Relations gave us an Opportunity of opening this Rupture, in which we observed a Portion of the Intestinum Ilium inflamed, and in part gangrenous, as frequently happens; and the Dilatation (or Aperture, as it is improperly called) of the Peritonæum through the Tendons of the abdominal Muscles, was so small, that it was scarce possible for a Finger to pass through, and this rendered a Reduction of the fore-mentioned Intestine altogether impracticable. But after this we found the whole

whole urinary Bladder prolapsed into the Scrotum.



OBSERVAT. XCIX.

An extraordinary Expansion of the Kidneys and Ureters of Sheep.

THAT the urinary Bladder should by the continual Afflux of that excrementitious Humour, be sometimes distended to an immense Bulk, is not at all surprizing, since its membranous Substance continually receiving the Urine which is there accumulated, may by that Means be very much extended. But that the Kidneys themselves should be distended into such an immense Bulk from the Obstruction of the Urine from them, so as to make them resemble urinary Bladders, surpasses all Expectation, and must excite the Admiration of

of every one. About two Years ago Mr. *Vogelefang*, a diligent Surgeon and Anatomist, brought me two Sheeps Kidneys to be dissected, which were so much distended and filled with a watery Humour, that each of them contained near two Pints. The Ureters were much inflected, and of so large a Capacity, that they would have readily admitted the Root of a very large Parsnip. The outer Surface of each distended Kidney had not lost its natural glandular Substance; but the intermediate Space was composed of a Membrane. Internally the Tabuli of the Pelvis resembled large Cells of so great a Capacity, as to admit a Walnut covered with its green Shell. I could easily press the Urine contained in the Bladder towards the Ureters and Kidneys; but then to press the Urine back again from the Kidneys towards the Bladder, required a considerable Force, and I found it pass in a very small Quantity through a little Aperture in the Middle of a membranous Closure which

which lay between the Bladder and Ureters. In short, the 'fore-mentioned Aperture was of such a Nature, that it freely admitted the Urine to pass from the Bladder towards the Kidneys, but on the contrary, it was almost in vain to attempt a Pressure of the Urine from the Kidneys towards the Bladder, whence no doubt proceeded a Regurgitation of the Urine, and this in Process of Time produced such a wonderful Expansion of the Kidneys and Ureters. These Kidneys, with their annexed Ureters, and a Portion of the Bladder, are kept in our Repository; so that any one who doubts of the Truth, may have an Opportunity of contemplating with myself the unusual Fabric of these urinary Parts.

O B S E R-

OBSERVAT. C.

*A Discovery of the true Structure of
the Glans Penis.*

AMong all the Authors who have hitherto given us a Description of the Penis, *De Graaf*, who was my particular Friend while living, ought deservedly to be placed at the Head, as a most accurate Anatomist, who yet has not perfectly discovered the Fabric of this Part, but has left some Things to be still found out by the Disquisition of Posterity; even with regard to the Glans Penis he seems to speak superficially, and to rely only upon the Opinions of others, as is evident in his Treatise, *De Virorum Organis Generationi inservientibus*, where we meet with the following Passage, p. 139, “To the two
“ Corpora Cavernosa and Urethra now
“ described, is added in their Fore-part
“ a Substance appearing more fleshy
“ than

“ than the rest of the Penis, and which
 “ is by Anatomists termed Glans Balanus,
 “ and sometimes it is denominated from
 “ its Resemblance to a Cherry”. But
 not only this Anatomist, but even all
 others both ancient and modern, have
 negligently passed over this Part of the
 Penis, although an exact Knowledge of
 it be absolutely necessary, and of the
 greatest Moment in Surgery, as will
 hereafter appear.

Johannes Van Horne, formerly my
 good Friend, in his Description of the
 Microcosm, p. 149, speaks concerning
 the Glans Penis in the following Manner,
 “ To these (meaning the Corpora Caver-
 “ nosa is added a Head, which from its
 “ Similitude is called Glans, consisting
 “ of a soft and flaccid Flesh, most ex-
 “ quisitely sensible, especially when
 “ turgid”.

Veslingius tells us, that the Glans Penis
 is composed of a soft, spongy, and fleshy
 Substance, without saying any Thing
 more particular. But *Blase* in his Notes
 to

to *Veslingius*, adds, “ that the Glans
 “ is joined to the Extremities of the
 “ Corpora Cavernosa, as the Head is to
 “ the Neck; for in its lower Part,
 “ which is as it were a Basis, it projects
 “ beyond the Body of the Penis, but
 “ in its upper Part it gradually termi-
 “ nates in an obtuse Point”.

Cabrolus tells us, that it is a Flesh
 different from the Flesh of Muscles and
 Glands. *Bartholin* in his Anatomy
 makes the Glans Penis to be like Flesh,
 but not soft and flaccid with *Van Horne*,
 but more sensible and compact than the
 rest of the Penis.

Vesalius in his Book *De Corporis Hu-
 mani Fabrica*, p. 649, in speaking of
 the Corpora Cavernosa, adds, “ b
 “ when they have arrived to that Part
 “ of the Penis, in which they are about
 “ to form the Glans, they become
 “ acute, and are spread over with the
 “ fleshy Substance of the Glans”.

Spigelius says the Glans is the last
 Part of the Penis growing to the two
 Corpora

Corpora Cavernosa, and projecting in some Measure beyond their Extremities, so as to encompass them round with a Circle like a Crown; but before this Substance is accumulated, is exquisitely sensible, and of a spongy Substance like the Penis, but more compact.

In *Columbus*, who is an Anatomist of considerable Note, in treating of the Glans Penis, we meet only with the following Passage, “ in the next Place “ the Corpora Cavernosa are inflected “ downwards, and inserted into the “ Margin of the Glans, which Glans “ is less hard or compact than the rest “ of the Penis”.

Thus we see the various Opinions of former Anatomists concerning the Structure of the Glans Penis, which if we compare diligently with the true Description of this Part next following, you will plainly see that none of them had a true Notion of the anatomical Structure in this Part. I can even confidently assert, that no one as I know

M of

of has hitherto observed the Structure of the Glans Penis to be truly such as it is; at which we need not be surpris'd, since it is a very difficult Matter to discover it, for the Knife is not sufficient in this Case, but it is quite useles for this Discovery. Also the Syringe, which we use to fill the Vessels, is likewise but indifferently adapted to this Purpose; though I must own that this first gave me a Notion of distinguishing the true Fabric of this Part which has hitherto lain concealed. Having therefore evacuated the whole Penis entirely of its Blood, and filled it with ceraceous Injection, I afterwards divided the Glans transversely into several Lamellæ, or Segments, and found it to be distended or filled with the same Injection, which gave me Reason to suspect, that the Substance of the Glans Penis was not fleshy; and therefore to be more clearly convinced of the Truth in this Respect, I had Recourse to Experiments. To wit, in the first Place, I first expressed
the

the Blood, and afterwards washed it out from the Penis with Water by a Syringe; I then inflated the Corpora Cavernosa (called by some Anatomists Corpora Nervosa, and by others Ligamenta Penis) confining the Wind by a strict Ligature, hoping that by this Means, after the Penis was dry, I should have an Opportunity of seeing the true Fabric of the Glans; but this was without Success, for my Experiment demonstrated indeed the true Fabric of the Corpora Cavernosa and interior Part of the Glans, but not at all did it give any Light into the Fabric of the exterior Part of the Glans. For by this Inflation of the Corpora Cavernosa, the interior Part of the Glans was distended and dried, while the exterior Part of it continued flaccid.

Having observed this, I inserted a Blow-pipe near the Root of the Penis into the smaller cavernous Body of the Urethra (called by some Corpus Spongiosum Urethræ) and then by Inflation,

the external Part of the Glans was distended, together with the spongy Body of the Urethra, while at the same Time the interior Part of the Glans continued flaccid. Having remarked this, I began to believe that the Corpus (or Corpora according to other Anatomists who make two of them) Cavernosum Penis was different from the lesser Corpus Spongiosum of the Urethra; and from this Thought I was led to a third and last Experiment, which every Way answered my Expectations. I first inserted a brass Pipe near the Root of the Penis, where it comes nearest to the Ossa Pubis, and by that Means inflated the Corpus Cavernosum Majus, and after inflating it, retained the Air so long by pressing with my Fingers, 'till the 'forementioned Tube was extracted, and again inserted into the Corpus Spongiosum of the Urethra; which I thus inflated in the same Manner; and after this I made a Ligature upon the Penis and dried it; but how difficult it is to retain the Wind
in

in the 'fore-mentioned cavernous Bodies, until all the Parts are dry, will appear evident to those, who shall hereafter endeavour to make the same Experiment. After having thus dried the Penis and its Glans, I cut them into transverse Segments, or Lamellæ, and by that Means found that the Glans Penis was nothing more than a true Continuation of the Corpus Cavernosum Majus, constituting the greater Part of the Penis, and also a Continuation of the Corpus Spongiosum of the Urethra, expanded over the former, especially in the lower Part, without any Change in its Substance.

These cavernous Bodies of the Penis and Urethra, are so disposed, that the thicker and larger of them constitutes the interior Part of the Glans, while the lesser cavernous Body of the Urethra composes the exterior Part of the Glans investing the former on all Sides. These two cavernous Bodies of the Penis and Urethra are separated from each other

by an intermediate Partition; so that Wind being blowed through a Tube into one of them, very rarely penetrates into the other; I say very rarely, because I remember once or twice to have seen the Air thus penetrate; and although *De Graaf* affirms, that when the cavernous Bodies of the Penis are inflated, the spongy Substance of the Urethra becomes also distended at the same Time, and the Reverse, from whence he has also deduced a remarkable Commerce, or Communication betwixt these two Bodies, yet we must own that this is contrary to our Experience; for a frequent Dissection of this Part of the Body, has proved to me, that this Communication very rarely happens betwixt the cavernous Body of the Penis, and that of the Urethra, unless the 'fore-mentioned Septum, or membranous Partition be injured, or unless that Communication should be performed by the Blood-vessels, which remarkably communicate with each other. For if the Corpus Cavernosum

nosum Majus be inflated, the Veins which run upon the Back of the Penis are usually inflated at the same Time, small Branches of which Veins are also subservient to the Corpora Cavernosa; and by this Means that Communication may take Place, as mentioned by the foregoing very expert Anatomist. *De Graaf* has also unjustly observed, that the spongy Body of the Urethra becomes gradually smaller and smaller, as it approaches near the Glans, in which it is at length obliterated; for rather the fore-mentioned spongy Body of the Urethra is the largest and thickest in the extreme Part of the Glans, whose whole external Surface it composes. On the contrary, the farther the Corpus Cavernosum Majus is extended into the Glans towards its Extremity, the more slender is it, nor is it continued to the Extremity of the Glans, as may be seen in the following Figures before cited.

Having thus discovered the true Fabric of this Part, it remains next for us to enquire of what Service it may be in the Practice of Physic.

I. Since it has been hitherto believed as certain, that the Glans was no more than a spongy Flesh added to the Penis, and since Anatomists did not so much as imagine the Glans Penis to be only a Continuation, as it really is, of the several cavernous Bodies, without any Change of their Substance; for that Reason most Surgeons have been less solicitous or fearful of a profuse Hæmorrhage, following from a Solution of Continuity in this Part. But how dangerous it must be for a Wound or Ulcer to take Place in the Glans, especially when they penetrate deep, or extend to the Corpus Cavernosum Majus, those are very well acquainted, who with ourselves have observed Men to be in Danger of their Lives by the Hæmorrhage following a small Wound or Ulcer, see Observat. XLII. preceding) more especially

cially if the Penis, which is thus injured be erected ; from whence so great a Quantity of Blood is frequently derived to the Glans, that the Hæmorrhage is hardly capable of being suppressed by any Means. An ulcerated Glans ought therefore to be cautiously treated, that it may not be injured internally. But superficial Injuries of the Glans, we know by Experience to be less dangerous, provided they are not seated in the Middle of that Part, which in its Circumference projects beyond the Penis, and is termed Corona Glandis, and in which the Blood-vessels running along the Back of the Penis, are very large, and which being any Way injured, usually excite a profuse and dangerous Hæmorrhage.

II. If a malignant Ulcer seated in the Glans, should make an Amputation of it necessary, we are from this Fabric taught, that it will be first necessary to apply a Ligature, in order to prevent
the

the profuse Hæmorrhage (see the thirtieth Observation preceding).

III. It is to be observed, that Ulcers seated in the upper Part of the Urethra in the Glans, are more dangerous for fear of a profuse Hæmorrhage, than those seated in the lower Part of the Urethra, because these last are more remote from the Corpus Cavernosum Majus, through which much larger Arteries are distributed, and therefore the Blood is derived thither in a much greater Quantity than into the cavernous Substance of the Urethra. It is also credible, that in the Case mentioned by *De Graaf*, p. 149, the Corpus Cavernosum Majus of the Penis was injured, because so large a Quantity as fourteen Pounds of Blood, could not have flowed in so short a Time from a like Injury in the small cavernous Body of the Urethra, through which very small Blood-vessels only are distributed.

IV. It

IV. It appears that the Glans can seldom be distended or erected throughout, unless both the cavernous Bodies, as well that of the Urethra as the Penis, together with their Nerves and Arteries, are well disposed. But if an Obstruction should be formed in any one of these Parts, it must follow of Consequence, that the Glans in Coition cannot be equally distended throughout. I say also, that the Erection of the Glans depends in a great Measure upon the laudable Disposition of the Arteries, without having any Regard to the Veins, because in them an Obstruction is very rarely, if ever, observed; for the Blood returning from the Penis and Glans, is not sent back through exceeding minute Branches, nor through a reticular Plexus, as *Malpighi* writes, but it is taken up through open and visible Orifices, or Foramina in the Veins. For the Veins distributed through the Penis are all of them, that I have been yet able to discover, perforated with
large

large Pores and visible Foramina like a Sieve, in the same Manner as we observe the splenic Vein of a Calf to be perforated, which Mechanism I believe has not been hitherto observed : By this Perforation of the Veins it is, that the Blood soon returns out of the Penis at the Instant when it grows flaccid. In short, if the spongy Substance and Vessels of the Penis and its Glans be compared with the Substance of the Spleen, especially that of a Calf, there will be found a great Resemblance, particularly in the Veins, supposing the splenic Glands to be well washed. But I may be bold enough to affirm myself to have been the first Inventor of the Method for washing out the Blood of the Spleen by injecting Water through the Veins, without offering any Injury to the investing Membranes ; as I am also acknowledged to have been the Author of this Method by *Van Horne*, formerly a very worthy Professor of Anatomy. For to the best of my Remembrance, in the Year 1664 I thus pre-

prepared several Spleens of Calves, at which Time no Anatomist was acquainted with the Encheiresis, which Spleens were afterwards publickly demonstrated by the 'fore-mentioned Professor to his Pupils with Applause. But to return to our Subject; the small Glands taken out of these Calves Spleens, after they have been inflated and dried, exactly resemble in their internal Fabric the Make of the Penis itself internally, for that which we call the Corpus Cavernosum of the Penis, Urethra and the Glans, is exactly resembled in the Spleen of a Calf by nervous Fibres; which Fibres in the Spleens of Sheep are not so numerous, nor do I find any of them in the human Spleen, even though *Sylvius* teaches the contrary, and from thence endeavours to raise an Hypothesis not every Way agreeable. In the mean Time, the human Penis, and the Spleen of a Calf, do not only resemble each other in their fibrous Substance, or spongy Texture, but also with respect

respect to their Veins, which are each perforated almost in the same Manner. But if we turn over those Authors who have given us any Figures, or Descriptions of the Penis, it will appear how little they have to say concerning the internal Veins distributed through the cavernous Bodies, insomuch, that they seem to pass over them with Design, and even some of them totally deny their Existence; and at this we need the less wonder, because it is very difficult to render them conspicuous.

Bartholin tells us, that the Penis has Arteries, Veins and Nerves; and asserts that the Veins are distributed throughout the external and internal Surface of the Penis, and this is all he tells us.

De Graaf takes no Notice of these internal Veins of the Penis, where he describes the Vessels of that Part.

Vesalius in the following Words freely confesses, that he never could perceive the Distribution of these Veins through the internal Surface of the Penis; for in speaking on the Veins and Arteries on this Part, he says, "Although the
" Vessels are extended into the cavernous Bodies of the Penis, yet I can
" hardly trace them with the Knife, to
" discover in what Manner they are inserted into the cavernous Bodies". If we enquire after the Cause of this Difficulty, we shall easily perceive, that there is but one Method of demonstrating these internal Veins, which I accidentally hit upon myself, namely, by inflating and drying the Penis, after the Blood had been washed out. For in this Inflation of the cavernous Bodies, all the Veins upon the Surface, as well as within the Penis, are likewise inflated at the same Time, because they are perforated almost like a Sieve, as may be discovered by examining them after drying by anatomical

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tomical Dissection, but if any one attempts to discover these Vessels any other Way, he will lose both his Time and Labour, because the Substance of the internal Veins, are by reason of their Porosity, easily confounded with the very porous internal Substance of the Penis.

F I N I S.



whence hard to be extracted. 97
Placenta remains ten months. 28. 33

Penis cut off. 30

Polypos of yf. Uterus. 6

Prolapsus Uteri wth yf. Bladder. 7 if
to be replaced g on one side only

24. wth the Os Tined 25

Polypos in yf. Antrum Higmoianum 77

Rectum an Inch thick &c 95. 96

Spinal Marrow & Brain become Water

Sinrhose Tumor in the Bot } 34. 35. 36

lom of yf. Stomach. 39 }

Sutures dont Stop fissures. 47

Spleen a gland for Lymph. 51. falls
into yf. pelvis 62. cut out of a
Dog. 66

Semilunar Valves of yf. Heart bony 69

Stones 42 cut out of yf. Womb & Blad
der. 1. large in yf. Kidneys 15. 56

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Tumors large in Infants Head 52

Trepan not always to be used in Contu
sions of yf. Head 60

Skin wanting about yf. Navel String 72. 73

& from hence the Viscera come
out sometimes. 72. 73.

Teeth hard disordered. 82

Vagina & rectum mortify'd & cur'd 59

Vertebra incurvates. 67

Vena Porta ossify'd. 70

Under holes a pint. 94

Veins of yf. Penis perforated. 100 p. 758

Wounds of yf. Lungs cur'd 53

Eyes mortal. 54

Uterus inverted 10. 26 mortify'd 24

Ulcers. 12. not to be handled
roughly 61. drawn to one side
of yf. Body 88. has a Motion 99



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6-750

8. n

Lion

ion. 99

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